



KCMT TUITION SCHOLARSHIP REQUEST FORM

Our desire regarding financial assistance here at KCMT is twofold. One is to never turn a child away due to finances, and the second is to provide financial assistance to as many families in need as we can.

In order to make wise decisions regarding the distribution of scholarship funds and to assist you to the fullest, we need just a few details. This information will be helpful to us in understanding your situation. Please note that this information is kept in the strictest confidence. Once we receive this form, we will contact you to discuss your need further.

General Information

- We ask that the **non-refundable Registration Fee of \$50 be paid** by the Registration date (August 6).
- As we typically offer only partial scholarships, please consider what you can contribute, including regular monthly payments for any remaining balance.

PARTICIPANT'S NAME _____

Have you participated in KCMT before? Yes No If yes, what was your last show? _____

PARENT/GUARDIAN'S NAME _____

Best Contact Phone _____ Email _____

PARENT/GUARDIAN STATEMENT – In the space below, please explain your situation and any special circumstances.

I understand tuition is \$200, and am requesting a scholarship in the amount of \$ _____.

Parent/Guardian Agreement

I understand that receiving a scholarship for participation in KCMT is a mutual commitment made between me and KCMT. I agree to follow all program guidelines and policies.

Parent/Guardian Signature _____ **Date** _____

Please email your completed form to: FINANCE@KCMT.ORG by **August 2, 2024**.