



Fair Share Agreement

As you are aware, a program of our success and magnitude even with restrictions could not exist without funding. Each family is assigned a "Fair Share" which is defined as the per student amount that is requested to cover the cost of the Naples High School Band Program. The Fair Share amount for the 2021-2022 school year is \$300.00. This covers **all** students enrolled in the Band Program (music, uniforms, transportation, outside instructors, etc.) Parents and/or guardians may choose to cover the entire \$300 amount or elect to pay \$200 in installments and volunteer 10 hours with our Band Booster Organization for the programs 70th anniversary celebration and band competition. (Your student must still complete his/her four (4) hours in order to letter in Band which is separate and does not apply to the family volunteer hours). The payment schedule is outlined below however, payments may be made in one lump sum if preferred:

Payments are due as follows:

- \$50 SPOT DEPOSIT – This guarantees a marching spot for your student and will be directly applied toward band fees in August

AND

- \$250 w/ signed agreement (below) by Monday July 26th, 2021.

OR

- \$100 w/ signed volunteer agreement (below) by Monday July 26th, 2021.
- \$50 final payment due by Friday August 27th, 2021.

** Note – Color guard uniforms are purchased in addition to the fair share agreement amount above. Uniform payments are made with a deposit at fitting and the remaining balance upon uniform issuance.*

*** Note – this fee schedule only applies to the 2021-2022 school year. Any donations and/or sponsorships above the fee schedule is greatly appreciated. Sponsorships over \$250.00 will be featured on the band website and have a shout out on the band social media sites.*

You can satisfy your Fair Share contribution by check, cash, or PayPal. Please do not hesitate to contact the Band Director or any of the Executive Board Members if you should have any questions or concerns relating to your Fair Share or your ability to meet the amount requested. It is crucial to the success of the program that you communicate any difficulty in the payment schedule to us as soon as it is identified. Please check the option that best suits your financial needs, and sign below. **THANK YOU!**

I understand and agree to the terms outlined above. Please make a selection below:

- _____ My family is able to meet the Fair Share Amount of \$300.
- _____ My family wishes to volunteer 10 hours and pay \$200 in installments.
- _____ My family would like to make the following tax deductible donation of \$_____.
- _____ My company would like to donate/sponsor the band in the amount of \$_____.
- _____ My company would like to donate the following _____.

Student Name _____ Parent Signature _____

State of Florida County of Collier

Signed and acknowledged before me on this the _____ day _____ of, 20_____.

By _____, who is personally known to me (), or online notarization (), or who Produced as identification ().

My family wishes to volunteer 10 hours and pay in installments.

(stamp)

Notary Signature _____