

Music Together[®] in Phoenix

Partial Scholarship Application

Date: _____ Child's Name & Birthdate: _____

Parents' Name: _____

Phone: _____ E-mail: _____

Share your situation: _____

Other activities child currently attending and if scholarships are involved:

Sometimes, if a family is able to help us fill a class that is on the edge of running, we can offer more scholarship aid. Please share which locations and classes you would be able to attend.

When available, we can help with partial scholarship of \$15 off per month (\$60 monthly fee) for the first child. Please inquire if you have multiple children attending.

*Scholarship funds cannot be combined with other discounts.

*Scholarship funds apply through the current school year and will be shared on an as-needed basis. They do not carry forward to future sessions. Please request a 2nd application on subsequent years.