

CHS BAND STUDENT ACCOUNT TRANSACTION FORM

Name: _____

Date: _____

Please deposit attached check or cash totaling \$ _____ in my account.

Please withdraw the following amounts from my student account for the band obligations stated:

Amount: _____

Reason: _____

Student Signature: _____

If the money is to be paid to other than CHS Band Parents, please state who the check should be made payable to: _____

Return check to me: _____ Mail directly to payee at: _____

OFFICE USE ONLY: SF Ck issued _____ Pymt Applied to Inv.: _____ GF Dep: _____