Diagon Drints

## Western Connecticut Youth Orchestra

## FINANCIAL ASSISTANCE APPLICATION

Your application will be strictly confidential.

Awards for financial assistance are funded by donations to the WCYO. As limited funds are available, awards are distributed based on financial need, not merit. In addition to financial assistance, an installment payment plan may be established to ease the burden of a lump sum payment. If an installment plan is desired, please indicate such in the explanation section below.

Musician's Last Name	First Name		
Date of Birth	Grade in School in <b>2025-2026</b>	Instrument	
(Guardian(s) can be substitu	uted for Father and/or Mother below.)		
Father's Name	Mother's Name	Mother's Name	
Address	Address		
Phone	Phone		
Email	Email	Email	
Name of Employer	Name of Emplo	Name of Employer	
Nature of Business	Nature of Busin	Nature of Business	
Position Held	Position Held _		
Please attach a copy of yo	our 2024 IRS 1040 (schedules are not n	eeded).	
Total Adjusted Gross Incom	e \$		
The income information repo	orted above is for (check one)Two	ParentsOne ParentGuardian(s)	
Please explain why your fan	mily circumstances merit this financial as	sistance award. Use back of page if needed.	
	to pay toward tuition? \$assistance be reduced if you could pay t	uition in installment payments?	
The above information is tru		py of my IRS 1040 Form (SS#s can be redacted):	
Father's signature		Date	
Mother's signature		Date	

Please complete form and submit by mail or email:

Mail - WCYO, P.O. Box 964, Ridgefield, 06877

Email - wcyo@wctyo.org