



SPRING-FORD MUSIC ASSOCIATION

P.O. Box 131 • Royersford, PA 19468
Springfordmusic@gmail.com

Student Point Account Withdraw Request Form

Date of Request: _____

Student Name: _____ Grade: _____

I am requesting _____ Points (dollars) from my Student Point Account for the following reason:

- | | |
|------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> Music Trip - Which Trip? _____ | <input type="checkbox"/> Band Coats |
| <input type="checkbox"/> Trip Spending Money - Which Trip? _____ | <input type="checkbox"/> Band Uniform Dry Cleaning |
| <input type="checkbox"/> Color Guard Shoes | <input type="checkbox"/> Music CD |
| <input type="checkbox"/> Color Guard Warm-up Suit | <input type="checkbox"/> Music Department Sweatshirt |
| <input type="checkbox"/> Band Marching Shoes | <input type="checkbox"/> Marching Band T-shirt / Music Program Clothes |
| <input type="checkbox"/> Chorus Dresses | <input type="checkbox"/> Valve/Slide Oil |
| <input type="checkbox"/> Strings for Instrument | <input type="checkbox"/> Reeds |
| <input type="checkbox"/> Bow Rosin | <input type="checkbox"/> Other: Explain: _____ |
| <input type="checkbox"/> Sheet Music | |

Student Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

Parent Email: _____ Telephone: _____

Mailings Address for Check (if applicable):

Other Information:

Note: For items that you have already purchased and you are requesting reimbursement, please attach receipt(s) here. Items purchased from SFMA, such as Marching Band T-shirts etc...do not require receipts.

SFMA – Use Only

Assistant Treasurer Approval – Date: _____

Treasurer Approval – Date: _____