

# Lamar Band Color Guard Activity Fees & Expenses 2022-2023

## Fall Marching Band Activity fees

**\$300**

This fee covers the costs of activities throughout the year including but not limited to:

- Transportation to contests, football games, and events
- Visual design and choreography for marching band
- Contest entry fees for marching season
- Misc. supplies for equipment, props, and rehearsal supplies
- "Show shirt" for the 2022 marching band show
- "Blue jug" ½ gallon Coleman water jug

**Total** – checks payable to "Lamar High School" \_\_\_\_\_  
write band & student's name in memo field

## Uniforms and Accessories

**Color Guard Season Costume Uniform**

**All Students**

**\$200**

Color Guard School Uniform One time purchase (use every season thereafter) \$100

**Total** - check payable to "Lamar High School" \_\_\_\_\_  
write band & student's name in memo field

## Other items to be taken care of on your own

- Guard gloves – approx. \$15
- Dance / jazz shoes – approx. \$30
- Dance Belt (Males) - \$25
- Appropriate undergarments
- Athletic shoes
- Hot weather clothing
- Sunglasses
- Sunscreen

*Discount for siblings in Lamar band simultaneously - 25% of activity fee  
Fee payment plan form available upon request*

# Arlington Independent School District Lamar High School Department of Fine Arts Fee Payment Plan Request

This information is confidential and will only be used for documentation purposes  
ONLY USE THIS FORM IF REQUESTING A PAYMENT PLAN OR FINANCIAL AID

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Campus LAMAR HIGH SCHOOL Organization BAND

Parent Name \_\_\_\_\_

Home Mailing Address \_\_\_\_\_

City

Zip

Home Phone \_\_\_\_\_ Other Contact \_\_\_\_\_

Other phone or e-mail address

## FEE COLLECTION OPTIONS

1. Collect one-half of the total fee at the beginning of the first semester and the remaining half of the fee at the beginning of the second semester.
2. Allow participants to pay out the fee monthly over the course of the school year (total due divided by 10)
3. Allow for a fee reduction to be based on the amount parents can pay monthly over the course of the school year.

I am requesting a Fee Payment Plan \_\_\_\_\_

Signature of Requestor

Initial your choice

\_\_\_\_\_ Option 1 - Pay one half of total each semester - due 1<sup>st</sup> week of each semester

\_\_\_\_\_ Option 2 - Pay monthly, one tenth of total - due 1<sup>st</sup> week of each month.

I am requesting a Fee Reduction \_\_\_\_\_ Requires Head Director Approval

Signature of Requestor

Initial your choice

\_\_\_\_\_ Option 3 - Pay monthly at a reduced level

Other - Describe your plan – email director with request

**It is important that students and parents participate fully in the program during the school year. Families should participate in fundraising efforts and volunteering at events.**