LAUREL HIGHLANDS BAND PARENT ASSOC. PURCHASE REQUEST

Complete this form to make withdrawals from your student account. No withdrawals can be made until your band/ensemble account balance is paid in full for the season.

I would like to request \$	from my child's student account for the
purchase of the following item(s):	
Please Circle:	
Band Jacket	
Band Shoes	Instrument Case
Gloves	Instrument Repair
Trip Payment	Instrument Instrument Stren
Mute	Instrument Strap
Reeds Mouth Diago	Instrument Stand
Mouth Piece Metronome/Tuner	Mallets, Drum Sticks Rifles, Flags and Sabers
	Rilles, Flays and Sabers
Other (subject to exec. board/director approval):	
Account/Student Name:	
Signature:	Date:
ADDRESS:	
Email Address:	
Are you requesting reimbursement for an item that you have already paid for? Y/N	
(For executive board use)	
Account Balance Available:	Date:
Executive Board Vote Date:	
The request was: Appro	oved Denied

This form is effective from June 1, 2014 through May 31, 2015. All forms must be submitted to band safe, with a receipt within 60 days of purchase.

Please allow four to six weeks for processing of this request.

email: lhbandofficer@gmail.com pride.lhbands.org