



TRIBORO YOUTH THEATRE

Board of Directors

Stephen Nedder
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David A. Renoni
Executive Director

April 2019

To Those Requesting Financial Aid or Scholarships:

Triboro Youth Theatre is a non-profit organization whose main concern is the welfare and well-being of children. It is our policy that no child be turned away due to the family's inability to pay the membership fee.

To that end we have established payment plans to spread out the fee over the length of the production. We also offer financial aid by giving partial and occasionally full scholarships. The money for these scholarships is from grants by the **Massachusetts Cultural Council** and the **Lloyd G. Balfour Foundation**.

In order to prove that there is a need for a scholarship, we ask that you provide TYT with a copy of your most recent IRS 1040 tax summary and write a brief narrative detailing the level of need. These forms are confidential and will only be seen by the Treasurer and the Chairperson of the Board of Directors.

If you have any questions, please feel free to email or call 508-399-1898.

Summer 2019 Registration Fees:

Frozen, JR. (Gr. 3-8) ... \$360
HS Show (Gr. 9-12) ... \$250

The following pages include:

- Page 2 – Payment Plan Agreement
 - Fill out this page if you are requesting to pay the membership fee over the course of the production.
 - A \$45 deposit is required upon registration.
- Page 3 – Scholarship Application
 - Fill out this page if you are requesting a partial or full scholarship.
 - This page must be accompanied by the tax forms and narrative.
 - A \$45 deposit is due upon registration.

Completed forms must be received on/before the first rehearsal for the actor's specific production. Forms may be submitted via email or US Mail. If you have any questions, please email us at admin@triboroyouththeatre.org.

Sincerely,

David A. Renoni, Executive Director



TRIBORO YOUTH THEATRE

Payment Plan Agreement

I, _____, as the parent/guardian of minor child
_____ agree to the payment plan set forth
below for the child to participate in a production at Triboro Youth Theatre.

Membership Fee: \$ _____
Required Deposit: -**\$45.00**
Remaining Balance: \$ _____

Summer 2019 Registration Fees:

Frozen, JR. (Gr. 3-8) ... \$360
HS Show (Gr. 9-12) ... \$250

I agree to pay the balance of the registration fee in increments of \$ _____
per week. The full membership fee is due two weeks before the
performance dates or the actor will be unable to continue in the production.

Parent/Guardian Signature

Date

For Triboro Youth Theatre, Inc.

Date



TRIBORO YOUTH THEATRE

SCHOLARSHIP/FINANCIAL AID APPLICATION

Parent's Name: _____

Address: _____

City, State & ZIP: _____

Telephone Number: (_____) _____

Email Address: _____

Participant's Name: _____ Show Name: _____

Amount of Assistance Requested: _____

Please attach your most recent 1040 summary tax form and a brief narrative detailing the level of assistance requested.

An email will be sent to you after request is reviewed.