

**EDISON HIGH SCHOOL  
BAND PARENT ORGANIZATION  
Student Credit Application Form**

Use this form to apply student credits from your child's fundraising account toward approved band program expenses.

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

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

Use Student Credits For: \_\_\_\_\_

Student Credit To Apply: \$ \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Approved:  Yes  No

Date: \_\_\_\_\_

Treasurer Initials: \_\_\_\_\_