



## RIVER'S EDGE ARTS ALLIANCE FINANCIAL AID APPLICATION

A limited amount of financial aid is available to families displaying financial need. Please fill out the form below and return with the completed registration form. Applications are reviewed on an individual basis and all information is kept confidential.

Date: \_\_\_\_\_ [Received: \_\_\_\_\_ Reviewed: \_\_\_\_\_ Awarded: \_\_\_\_\_]

Student's name: \_\_\_\_\_ School: \_\_\_\_\_ Gr. \_\_\_\_\_

Name of Program: \_\_\_\_\_

Parent/Guardian 1: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (daytime) \_\_\_\_\_ (evening) \_\_\_\_\_

Parent/Guardian 2: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (daytime) \_\_\_\_\_ (evening) \_\_\_\_\_

Annual income \$ \_\_\_\_\_ # of people this income supports \_\_\_\_\_

Please provide a signed copy of your most recent tax return.

Please include information describing financial circumstances (you may use a separate piece of paper):

Program tuition amount: \$ \_\_\_\_\_ Amount of aid requested: \$ \_\_\_\_\_

Would a payment plan be helpful? \_\_\_\_ yes or \_\_\_\_ no

Return to: River's Edge Arts Alliance  
155 Apsley St  
Hudson, MA 01749

Call 978-562-1646 or email [info@upwitharts.org](mailto:info@upwitharts.org) with questions.