## **NHS Eagle Pride Rose Parade Payment Coupons**

Please use these coupons to submit your payments for the Rose Parade trip.

## How do we pay?

Payments will be made to the Niceville High School Band via check or money order made out to **NHS Band**. Payments must be accompanied by the correct month's payment coupon. Checks/money orders and accompanying payment coupons can be submitted as follows:

- 1. Placed in the red box in the band room
- 2. Mailed to: Niceville High School, ATTN: BAND, 800 E John Sims Pkwy, Niceville, FL 32578

I have more than one student going on the trip, can I write one check to cover multiple students?

Yes – you can make a payment for multiple students with one check or money order, but you do need to submit a separate payment coupon with the check or money order for each student.

I have more than one student going on the trip, can I complete one payment coupon to cover multiple students?

No – you can make a payment for multiple students with one check or money order, but you do need to submit a separate payment coupon with the check or money order for each student. This will help ensure each student is properly credited in their Charms account.

## Can I pay ahead of the payment schedule?

Yes – you are welcome to make larger payments than what is required by the payment schedule or submit payments between payment due dates. Just indicate the amount you are paying on your payment coupon.

My student received a check to NHS Band from a family member/friend to help pay for their trip. How do I get that credited to my student's trip account?

You can simply turn that in as part of or in addition to your monthly payment and annotate it on the payment coupon, or you may submit it between payment due dates with a Miscellaneous payment coupon, which can be found at the end of this document.

If you would like to contribute additional funds for scholarships to assist other Eagle Pride members who want to attend the trip but need assistance, you may add funds to your payment and annotate it on the payment coupon or send a separate check or money order to the Finance Chair.

If you have any questions regarding payments please email EaglePrideFinance@gmail.com.

	nac nose i araac	Payment – March	2023 - \$300	
Student Name:			2023/2024 NHS Grade:	
Parent Name:			PAYMENT INFORMATION	
Phone:			Use funds from Charms account: \$	
Email:			Check/Money Order in amount of: \$	
Signature:			Additional funds for scholarships: \$	
Band Use Only:	Check #	MCF#		
NHS Eagle P	ride Rose Parade	Payment – April 20	023 - \$300	
Student Name:			2023/2024 NHS Grade:	
Parent Name:			PAYMENT INFORMATION	
Phone:			Use funds from Charms account: \$	
Email:			Check/Money Order in amount of: \$	
Signature:			Additional funds for scholarships: \$	
Band Use Only:	Check #	MCF #		
		Payment – May 20		
Student Name:			2023/2024 NHS Grade:	
Student Name: Parent Name:			2023/2024 NHS Grade: PAYMENT INFORMATION	
Student Name: Parent Name: Phone:			2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$	
Student Name: Parent Name: Phone: Email:			2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$  Check/Money Order in amount of: \$	
Student Name: Parent Name: Phone: Email: Signature:			2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$  Check/Money Order in amount of: \$  Additional funds for scholarships: \$	
Student Name: Parent Name: Phone: Email: Signature:			2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$  Check/Money Order in amount of: \$	
Student Name: Parent Name: Phone: Email: Signature: Band Use Only:			2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$  Check/Money Order in amount of: \$  Additional funds for scholarships: \$  TOTAL AMOUNT: \$	
Student Name: Parent Name: Phone: Email: Signature: Band Use Only:  NHS Eagle P	Check #	Payment – June 20	2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$ Check/Money Order in amount of: \$ Additional funds for scholarships: \$  TOTAL AMOUNT: \$	
Student Name: Parent Name: Phone: Email: Signature: Band Use Only:  NHS Eagle P  Student Name:	Check #	Payment – June 20	PAYMENT INFORMATION  Use funds from Charms account: \$ Check/Money Order in amount of: \$ Additional funds for scholarships: \$  TOTAL AMOUNT: \$  2023/2024 NHS Grade:	
Student Name: Parent Name: Phone: Email: Signature: Band Use Only:  NHS Eagle P  Student Name: Parent Name:	Check #	Payment – June 20	PAYMENT INFORMATION  Use funds from Charms account: \$ Check/Money Order in amount of: \$ Additional funds for scholarships: \$  TOTAL AMOUNT: \$  2023/2024 NHS Grade: PAYMENT INFORMATION	
Student Name: Parent Name: Phone: Email: Signature: Band Use Only:  NHS Eagle P  Student Name: Parent Name: Phone:	Check #	Payment – June 20	PAYMENT INFORMATION  Use funds from Charms account: \$ Check/Money Order in amount of: \$ Additional funds for scholarships: \$  TOTAL AMOUNT: \$  2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$	
Student Name: Parent Name: Phone: Email: Signature: Band Use Only:  NHS Eagle P  Student Name: Parent Name: Phone: Email:	Check #	Payment – June 20	PAYMENT INFORMATION  Use funds from Charms account: \$ Check/Money Order in amount of: \$ Additional funds for scholarships: \$  TOTAL AMOUNT: \$  2023/2024 NHS Grade: PAYMENT INFORMATION	

NHS Eagle P	ride Rose Parade	Payment – July 202	23 - \$450
Student Name:			2023/2024 NHS Grade:
Parent Name:			PAYMENT INFORMATION
Phone:			Use funds from Charms account: \$
Email:			Check/Money Order in amount of: \$
Signature:			Additional funds for scholarships: \$
Band Use Only:	Check #	MCF #	TOTAL AMOUNT: \$
NHS Eagle P	ride Rose Parade	Payment – August	2023 - \$450
Phone:			Use funds from Charms account: \$
Email:			Check/Money Order in amount of: \$
Signature:			Additional funds for scholarships: \$
Band Use Only:	Check #	MCF #	TOTAL AMOUNT: \$
-		Payment – Septem	ber 2023 - \$450 2023/2024 NHS Grade:
Parent Name:			
Phone:			Use funds from Charms account: \$
Email:			Check/Money Order in amount of: \$
Signature:			Additional funds for scholarships: \$
Band Use Only:	Check #	MCF #	TOTAL AMOUNT: \$
NHS Eagle P	ride Rose Parade	Payment – Octobe	r 2023 - \$450 *** FINAL PAYMENT ***
Student Name:			2023/2024 NHS Grade:
Parent Name:			PAYMENT INFORMATION
Phone:			Use funds from Charms account: \$
Email:			Check/Money Order in amount of: \$
Signature:			Additional funds for scholarships: \$
Band Use Only:	Check #	MCF#	TOTAL AMOUNT: \$

NHS Eagle P	ride Rose Parade Mi	scellaneous Pay	ment Coupon
Student Name:			2023/2024 NHS Grade:
Parent Name:			PAYMENT INFORMATION
Phone:			Use funds from Charms account: \$
Email:			Check/Money Order in amount of: \$
Signature:			Additional funds for scholarships: \$
Rand Use Only:	Check #	MCF #	
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	ride Rose Parade Mi		
NHS Eagle P		scellaneous Pay	yment Coupon
NHS Eagle P Student Name:	ride Rose Parade Mi	scellaneous Pay	ment Coupon  2023/2024 NHS Grade:
NHS Eagle P Student Name: Parent Name:	ride Rose Parade Mi	scellaneous Pay	ment Coupon  2023/2024 NHS Grade:  PAYMENT INFORMATION
NHS Eagle P Student Name: Parent Name: Phone:	ride Rose Parade Mi	scellaneous Pay	ment Coupon  2023/2024 NHS Grade:  PAYMENT INFORMATION
NHS Eagle P Student Name: Parent Name: Phone: Email:	ride Rose Parade Mi	scellaneous Pay	/ment Coupon  2023/2024 NHS Grade:  PAYMENT INFORMATION  Use funds from Charms account: \$