

# North Reading Public Schools Universal User Fee Cap Application

**Failure to provide all information will result in a delay in processing this request.**

Your first name:	Last name	Phone (H)	Email address:
		Phone (C)	
Other Parent/Guardian:	Last name	Phone (H)	Email address:
		Phone (C)	

List all Students and User Fee Projection for the 2023-24 school year.

Please Allocate User Fee Per Student and Program:

Student First Name:	Student Last Name:	Grade	School	Athletic User Fee	Middle / High Extra-Curricular User Fee	Elementary Middle / High Performing Arts User Fee	Bus Fees	Sub Total
<b><u>DUE NO LATER THAN MAY 1ST</u></b>			<b>TOTALS:</b>					

**An adult household member must sign the application.**

*I understand that school officials may verify the information. I verify that to the best of my knowledge all information above is accurate.*

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**SEND DOCUMENTATION & COMPLETED FORM TO: Sabita Pai, Finance Office, North Reading Public Schools, 189 Park Street, North Reading, MA 01864: Electronic copies are preferred to [spai@nrpsk12.org](mailto:spai@nrpsk12.org).**

FOR NORTH READING BUSINESS STAFF ONLY		
TOTAL ANNUAL AMOUNT	CONFIRMED BUSINESS OFFICE	APPROVED / DENIED
ADDITIONAL NOTES/COMMENTS:		

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_