WAIVER STATEMENT

| If your child(ren) qualifies for free or reduced price meals, you may also be eligible fo full or partial waiver of school fees. I understand that I will be releasing information the child(ren). I give up my rights to confidentiality for waiver of school fees ONLY. I cert being made. YOU DO NOT HAVE TO COMPLETE THIS WAIVER TO GET FREE OR REDUCED P | nat will show that I applied for free and reduced price school meals for my tify that I am the parent/guardian of the child(ren) for whom application is |
|---|--|
| Signature of Parent/guardian | _Date |