

District's Holiday Gift Drive - Families Must Opt into the program

Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.

Yes! I DO.

If I qualify for Free or Reduced Meals, IDO want the Food Service

Director to add my Family Name/Student Names (from my meal application) to the **District's**

Holiday Christmas GIFT Drive list. (We will only provide family/student names/family

address. We do not share income, signatures or other personal information) All other information is kept

confidential.

If you checked "Yes" to the box above, fill out the form below to ensure that your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____ Grade: _____

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Child's Name: _____ School: _____ Grade: _____

Child's Name: _____ School: _____ Grade: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may call Ms. Tricia Wood, Director 724-693-3019 or email paewood@southfayette.org or drop off at any campus office in a sealed envelope marked: Attn: Food Service
Please return this form at your earliest convenience.

[Type text]