



North Crawford School District

47050 County Road X, Soldiers Grove, WI 54655

Fax: 608.735.4317

SHARING INFORMATION WITH OTHER PROGRAMS

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** want school officials to share information from my Free and Reduced Price School Meals Application with the Elementary/Junior High School and High School Office Secretaries. The fees that may be waived are:

- Locker
- Athletic
- Field Trip

If you checked yes to any or all of the boxes 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: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may call Angie Boland at 608.735.4318 or e-mail at aboland@ncrawford.k12.wi.us. Return this form to: Angie Boland, 47050 County Road X, Soldiers Grove, WI 54655.