

2017-2018

**WAIVER STATEMENT
(School Owned Band Instrument)**

If your child(ren) qualifies for free or reduced price meals, you may also be eligible for other benefits. One of these benefits is a **school owned band instrument fee**. If you sign this waiver, your child(ren) will be considered for a full or partial waiver of a **school owned band instrument fee**. I understand that I will be releasing information that will show that I applied for free and reduced price school meals for my child(ren). I give up my rights to confidentiality for waiver of school fees ONLY.

Student Name _____	Grade in school _____
Student Name _____	Grade in school _____
Student Name _____	Grade in school _____
Student Name _____	Grade in school _____
Student Name _____	Grade in school _____
Student Name _____	Grade in school _____

Full Waiver _____ Partial Waiver _____

I certify that I am the parent/guardian of the child(ren) for whom application is being made.

Signature of Parent/guardian _____ Date _____