

**CONSENT TO SHARE ELIGIBILITY INFORMATION  
FOR OTHER SCHOOL PROGRAMS  
2024-25 School Year**

If you qualify for free or reduced-price meals, you may also be eligible for waived/reduced fees for other school programs.

If you give consent, Nutrition Services will share your student’s eligibility information with the appropriate school personnel.

To give consent you must check the box for each program you would like to participate in, write your student’s name, sign, and date.

Completed forms should be returned to RSD Nutrition Services, 701 Stevens Drive, Richland, WA 99352.

Check to Consent	Title of school program
<input type="checkbox"/>	ASB (includes sports, dance tickets, non-credit band & choir activities)
<input type="checkbox"/>	SAT/PSAT Testing
<input type="checkbox"/>	Chromebook Insurance
<input type="checkbox"/>	Summer School

**Print Student Name(s) here:**


Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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