



Dear Parents and Guardians,

Canton Local Schools has partnered with the Akron Canton Food Bank and Local Churches to provide weekend meals for eligible students upon completing the necessary paperwork. Beginning in early October, a bag of food will be sent home on Friday afternoons. Students will receive two breakfasts, two lunches, and two snacks.

Please list all children and students in your household below. Make sure to complete the Fee Waiver section below. If you have any questions, contact Julie Friday at 330-484-8010 or email at julie.friday@cantonlocal.org.

Today's Date: _____ Phone Number: _____

Parent/Guardian Name: _____

Student Name: _____ Grade: _____

Allergies _____

Student Name: _____ Grade: _____

Allergies _____

Student Name: _____ Grade: _____

Allergies _____

Student Name: _____ Grade: _____

Allergies _____

I, _____, give permission for my student(s) to participate in the Wildcat Backpack Program.

Parent/Guardian Signature:

*****Please complete back of this form and return to your building secretary*****

PERMISSION TO SHARE

FEE WAIVER FORM

Dear Parent/Guardian:

To save you time and effort, the information we received from Ohio Jobs and Family Services 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.**

Yes! I DO want the Food Service Director to share information with **the Canton Local Schools for potential School Fee Waiver and Weekend Backpack Program.**

No! I DO NOT want information with any of these programs.

****This form must be signed by the parent/guardian to be valid****

Student Name: _____ School: _____

Student Name: _____ School: _____

Student Name: _____ School: _____

Student Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

**Return this form to Building Secretary
ATTN: Lisa Hookway**