Warner Thanksgiving Food Drive

Help us collect canned goods, non-perishable foods, and pantry staples for families in need this Thanksgiving season.

NOVEMBER 2–16, 2026

Place donations in the boxes around the perimeter of the library

Needed Items:

Pre-K
Boxed Jiffy Cornbread Mix and Boxed Jiffy Pie Crust Mix

Kinder
Boxed Macaroni and Cheese and Canned Pie Filling

First Grade
Stuffing Mix and Turkey Gravy

Second Grade
Boxed Instant Mashed Potatoes and Canned Sweet Potatoes

Third Grade
Cans of Cream of Mushroom/Cream of Chicken Soup and Chicken Broth

Fourth Grade
Canned Sweet Potatoes and Cranberry Sauce

Fifth Grade
Canned Green Beans, Corn, and Peas

BENEFITING CY-FAIR HELPING HANDS

Sponsored by Warner Student Council





WARNER ELEMENTARY

Spirit Cart

.50 CENTS




$1 ITEMS








$2 ITEMS





$4 ITEMS





$3 ITEMS



- CASH ONLY FOR STUDENTS
- NO BILLS > $20
- PARENTS MAY USE CC IF PRESENT



AND MUCH MORE!!

Local TABLE

WANTS TO SHOW SOME

Love to our Local

WARNER WOLVES

Spirit Night

NOVEMBER 17TH, 2026

DINE IN FROM 4PM TO CLOSE

MENTION WARNER ELEMENTARY WITH YOUR SERVER, & WE WILL DONATE 15% OF YOUR GUESTS' DINE-IN OR TAKE-OUT SALES



Lakeland Village Center
10535 Fry Road
Cypress, TX 77433

★ 2026-2027 ★

YEARBOOK

★ FOR SALE ★



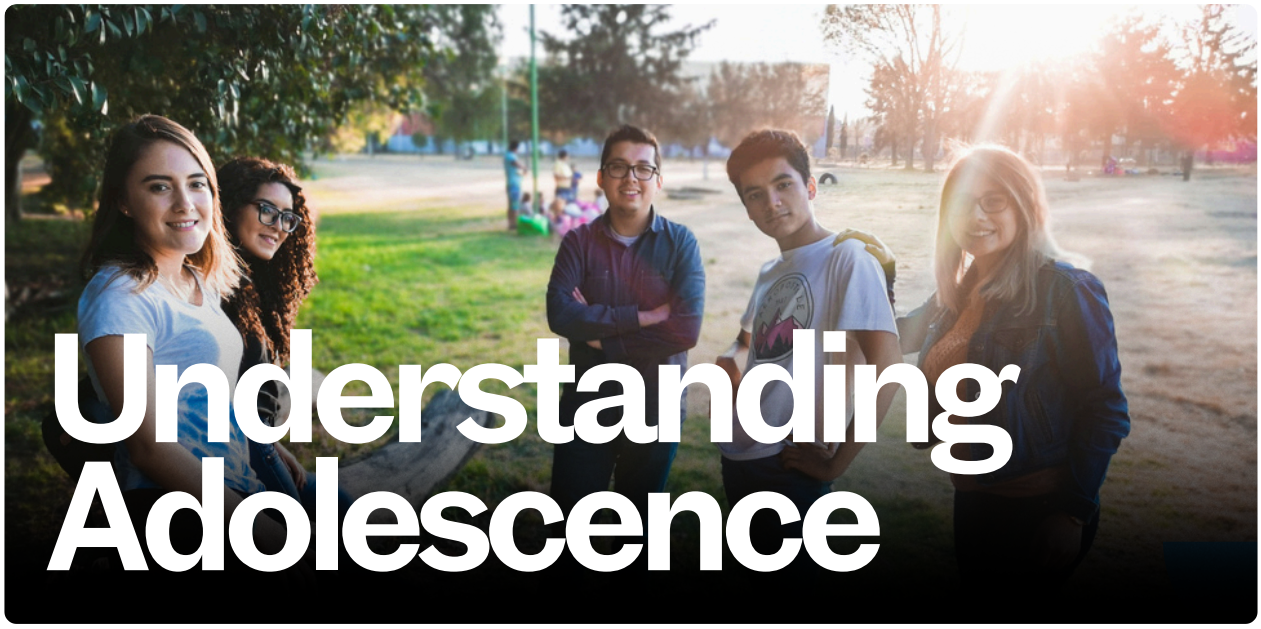
NOW

$50!

BUY BEFORE THEY SELL OUT!

★ WWW.JOSTENS.COM ★

Presented by: Cy-Fair ISD Department of Psychological Services



Understanding Adolescence

Parenting for Connection & Confidence

Learn research-proven strategies addressing communication, expectations, social media challenges, emotional/behavioral concerns and more.

For parents and guardians of children ages 11-17

Childcare provided for ages 3 and up

Cy-Fair High School
22602 Northwest Freeway
Cypress, Tx. 77429
Nov. 10th & 17th
6:00 - 7:30 P.M.

For more information, contact:
CFISD Psychological Services Dept.
281-517-6394
lyndsey.cabrera@cfisd.net

Course offered FREE of charge

Spanish Translation Available

REGISTRATION REQUIRED

Register all attending adults and children needing care using the QR code.

CFISD FOR ALL
OPPORTUNITY IS HERE.

Presented by: Cy-Fair ISD Department of Pscyhological Services



Building Positive Behaviors

Parenting Our Children

Discover research-based strategies to manage difficult behaviors at home or in any setting. Learn step-by-step instruction on stopping unwanted behaviors by building strong alternatives.

For parents of children ages 3-12

Childcare provided for ages 3 and up

Cy-Fair High School
22602 Northwest Freeway
Cypress, Tx. 77429

Nov. 10th & 17th
6:00 - 7:30 P.M.

For more information, contact:
CFISD Psychological Services Dept.
281-517-6394
lyndsey.cabrera@cfisd.net

Course offered FREE of charge

Spanish Translation Available

REGISTRATION REQUIRED

Register all attending adults and children needing care using the QR code.

CFISD FOR ALL
OPPORTUNITY IS HERE.

CYPRESS FAIRBANKS
INDEPENDENT SCHOOL DISTRICT

MENTAL HEALTH & WELLNESS FAIR

PRESENTED BY MHIT

Wednesday, Dec. 2, 2026
3:30 - 6:30 P.M. @ Berry Center

8877 Barker Cypress Road, Cypress, TX 77433

Clear bag policy will be in effect

Join us for a free community event where attendees can connect with local mental health and wellness providers, engage in self-care activities, and explore student-led exhibits!



MENTAL HEALTH
Intervention Team
CYPRESS-FAIRBANKS ISD

VIA 313 PRESENTS

SPIRIT NIGHT

WARNER ELEMENTARY

DEC 8th

5:00pm - 9:00pm

DINE WITH US ON TUESDAY DECEMBER 8th AND WE'LL DONATE 15% OF YOUR ORDER TO WARNER ELEMENTARY!

DINE IN & TO-GO!

PLEASE LET OUR STAFF KNOW YOU ARE THERE FOR THE SPIRIT NIGHT

GIVING BACK NEVER TASTED SO GOOD!

VIA 313 PIZZERIA

CYPRESS LOCATION ONLY: 20725 Tuckerton Rd, Ste 100, Cypress, TX 77433

SRC DEMOS

VOLUNTEERS NEEDED!



Each grade level at Warner gets to enjoy two awesome, animal-related demonstrations, and we would love for you to help out!



How to Volunteer...



1. Sign up for a Demo and to pick up/return the animals using the SignUpGenius link or QR code.

2. You must attend one training session for that Demo at the Science Resource Center.





3. Be ready to have some fun on demonstration day as we bring the animals to school and teach students about them!



Questions? Email Kristin Jordan at src@warnerpto.org

Health Guidance
for Going to School

CFISD



Showing up to school every day is critical for children's well-being, engagement and learning.

Make sure to send children to school if they are:

- Generally healthy and well.
- Participating in usual day-to-day activities.
- Children can even go to school if they:
  - Have a mild cold, which may include a runny nose and/or cough.
  - Have eye drainage without fever, eye pain or eyelid redness.
  - Have a mild stomachache.
  - Have a mild rash with no other symptoms.
  - Have been fever free for 24 hours without the use of fever-reducing medication.

Avoid keeping children at home unless they are too sick to participate. Please see the back of this handout for details. Note that in most situations, a health-care provider's note is not needed to return, you can send a parent note.

Children may also avoid school due to anxiety (symptoms may include decreased appetite, feeling tired, stomachache, headache, etc). If you are worried that your child may be suffering from anxiety, talk with your child's teacher, the school nurse, counselor or other school staff to discuss the challenge and identify what can help your child stay in school.

Please note: This document is not meant to take the place of local health department guidance about contagious illnesses such as Covid-19 and the flu.



Reasons to keep me home from school and what needs to happen before I can return

What is my symptom?	When should I stay home and when to seek medical care?	When can I return to school?
Fever	I have a fever of 100.0°F or higher. **Seek medical care** if I have fever and any of the following: ear pain, sore throat, rash, stomachache or tooth pain.	If I have been fever free for 24 hours without the use of fever-reducing medication and I am feeling better.
Vomiting and/or diarrhea	If I have vomited 2 or more times in the last 24 hours. If my stool is watery and I may not make it to the toilet in time. **Seek medical care** if I have stomach cramping and fever, I have bloody or black stool, or I am showing signs of dehydration (tired and sleepy, dry mouth and not urinating at least once in the last 8 hours).	If I have not had vomiting and/or diarrhea in the past 24 hours and I am feeling better.
Persistent cough or trouble breathing	**Seek medical care** if I have a persistent cough, difficulty breathing or trouble catching my breath or if I develop a fever with the cough. These symptoms may be signs of a serious or contagious illness that should be evaluated by a health-care provider.	Once I am feeling better and I have been cleared for return by my health-care provider. If my symptoms were due to asthma, please make sure that I have my breathing medication available to use at school.
Rash	**Seek medical care** if the rash has blisters, is draining, is painful, looks like bruises and/or if I develop a fever	Once my rash has healed or I have been cleared for return by my health-care provider.
Eye irritation	**Seek medical care** if I have eye swelling, eye pain, trouble seeing or an eye injury.	Once I am feeling better.
Sore throat	**Seek medical care** if I have drooling, trouble swallowing or a fever and/or rash.	Once I am feeling better if I have been fever free for 24 hours without fever reducing medication. If I was prescribed an antibiotic by my health-care provider, then I may return 24 hours after the first dose.

If you don't know whether to send your child to school or have specific concerns regarding your child's health, contact your child's health-care provider, a local urgent care or the school nurse.


Congratulations
WARNER WOLVES!
A
RATED
★ WE EARNED DISTINCTIONS IN: ★
POSTSECONDARY READINESS
ACADEMIC ACHIEVEMENT IN SCIENCE
ACADEMIC ACHIEVEMENT IN READING/ LANGUAGE ARTS
WARNER PRIDE!

ESL Classes for Parents 2026-2027

If your child is enrolled in a Cypress-Fairbanks school* and you want to learn English, you are invited to enroll in the **ESL classes for parents.** English classes are **FREE**! Three levels of English are available – Intro, Beginner and Intermediate.

Location	Address	Dates	Time
Owens Elem School	7939 Jackrabbit Rd Houston TX 77095	**Saturday Classes** Registration and 1st class: September 26th Oct 3, 24, 31, Nov 7, 14, Dec 5, 12 Jan 16, 23, 30 Feb 6, 13, 20, 27 & March 6	8:00 a.m. 12:00 p.m.
Lieder Elem School	17003 Kieth Harrow Blvd. Houston Tx, 77084	**Saturday Classes** Registration and 1st class: September 26th Oct 3, 24, 31, Nov 7, 14, Dec 5, 12 Jan 16, 23, 30 Feb 6, 13, 20, 27 & March 6	8:00 a.m. 12:00 p.m.

The child must be enrolled in the Bilingual or ESL program in the district. If you have any questions, please call 281-517-6387.

Clases de inglés para padres 2026-2027

Si usted tiene hijos en una escuela del distrito de Cypress-Fairbanks y desea aprender inglés, está invitado a inscribirse en las **clases de inglés para padres**.* ¡Las clases de inglés son **GRATUITAS**! Se ofrecen tres niveles: Introducción, Principiante e Intermedio.

Escuela	Dirección	Fechas	Horario
Escuela Primaria Owens	7939 Jackrabbit Rd. Houston, TX 77095	**Sábados** Inscripción y primera clase: 26 de septiembre Las clases continúan: Octubre 3, 24, 31 Noviembre 7, 14 Diciembre 5, 12 Enero 16, 23, 30 Febrero 6, 13, 20, 27 y Marzo 6	De 8:00 a.m. a 12:00 p.m.
Escuela Primaria Lieder	17003 Kieth Harrow Blvd. Houston Tx, 77084	**Sábados** Inscripción y primera clase: 26 de septiembre Las clases continúan: Octubre 3, 24, 31 Noviembre 7, 14 Diciembre 5, 12 Enero 16, 23, 30 Febrero 6, 13, 20, 27 y Marzo 6	De 8:00 a.m. a 12:00 p.m.

El estudiante debe estar inscrito en el programa Bilingüe o ESL. Favor de llamar al 281-517-2954 si tiene alguna pregunta.

ESL Classes for Parents 2026-2027

If your child is enrolled in a Cypress-Fairbanks school* and you want to learn English, you are invited to enroll in the **ESL classes for parents.** English classes are **FREE**! Three levels of English are available – Intro, Beginner and Intermediate.

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Lieder Elem School	17003 Kieth Harrow Blvd. Houston Tx, 77084	**Saturday Classes** Registration and 1st class: September 26th Oct 3, 24, 31, Nov 7, 14, Dec 5, 12 Jan 16, 23, 30 Feb 6, 13, 20, 27 & March 6,	8:00 a.m. 12:00 p.m.

The child must be enrolled in the Bilingual or ESL program in the district. If you have any questions, please call 281-517-6387.

Lớp Học ESL Cho Phụ Huynh 2026-27

Quý vị với học sinh trong Khu Học Chánh Cy-Fair có dịp học thêm Anh Ngữ với chương trình đặc biệt ESL để dành **cho phụ huynh** có con đang học Cyfair. Lớp học Anh Ngữ cho phụ huynh là **MIỄN PHÍ,** và sẽ có ba cấp trình độ để học tiếng Anh: Vỡ Lòng, Sơ Cấp, và Trung Cấp.

Location	Address	Dates	Time
Trường học Owens Elementary	7939 Jackrabbit Rd Houston TX 77095	**Lớp Học Mối Thứ Bảy** Ngày Khai Giảng Đăng ký và buổi học đầu tiên: **Ngày 26 tháng 9** Ngày 3, 24, 31 tháng 10, Ngày 7, 14 tháng 11, Ngày 5, 12 tháng 12 Ngày 16, 23, 30 tháng 1 Ngày 6, 13, 20, 27 tháng 2 & Ngày 6 tháng 3	8:00 sáng - 12:00 trưa
Trường học Lieder Elementary	17003 Kieth Harrow Blvd. Houston Tx, 77084	**Lớp Học Mối Thứ Bảy** Ngày Khai Giảng Đăng ký và buổi học đầu tiên: **Ngày 26 tháng 9** Ngày 3, 24, 31 tháng 10, Ngày 7, 14 tháng 11, Ngày 5, 12 tháng 12 Ngày 16, 23, 30 tháng 1 Ngày 6, 13, 20, 27 tháng 2 & Ngày 6 tháng 3	8:00 sáng - 12:00 trưa

Con qúy vị phải đang trong lớp học ESL. Nếu quý vị muốn hiểu thêm về lớp học, xin gọi: 281-517-6387

FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. **Cy-Fair ISD** offers healthy meals every school day. Breakfast costs **$1.25**; lunch costs **$2.50** for secondary (High School and Jr. High School). Breakfast cost **$1.00** and **$2.25** for lunch for elementary level. Your child(ren) may qualify for free meals or for reduced-price meals. Students eligible for **Reduced** price meals will eat free for the 2026-2027 school year. This packet includes an application for free or reduced-price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

1. **Who can get free or reduced-price meals?**
   - All children in households receiving benefits from SNAP, FDPIR, or TANF, are eligible for free meals.
   - Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
   - Children participating in their school's Head Start program are eligible for free meals.
   - Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
   - Children may receive free or reduced-price meals if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart.

Income Eligibility Guidelines July 1, 2026- June 30, 2027

Family Size	Annually		Monthly		Twice per Month		Every Two Weeks		Weekly	
	Free	Reduced	Free	Reduced	Free	Reduced	Free	Reduced	Free	Reduced
1	$20,748	$29,526	$1,729	$2,461	$865	$1,231	$798	$1,136	$399	$568
2	$28,132	$40,034	$2,345	$3,337	$1,173	$1,669	$1,082	$1,540	$541	$770
3	$35,516	$50,542	$2,960	$4,212	$1,480	$2,106	$1,366	$1,944	$683	$972
4	$42,900	$61,050	$3,575	$5,088	$1,788	$2,544	$1,650	$2,349	$825	$1,175
5	$50,284	$71,558	$4,191	$5,964	$2,096	$2,982	$1,934	$2,753	$967	$1,377
6	$57,668	$82,066	$4,806	$6,839	$2,403	$3,420	$2,218	$3,157	$1,109	$1,579
7	$65,052	$92,574	$5,421	$7,715	$2,711	$3,858	$2,502	$3,561	$1,251	$1,781
8	$72,436	$103,082	$6,037	$8,591	$3,019	$4,296	$2,786	$3,965	$1,393	$1,983
For each additional family member, add										
	$7,384	$10,508	$616	$876	$308	$438	$284	$405	$142	$203

2. **How do I know if my children qualify as homeless, migrant, or runaway?** Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call 281-517-2117 or e-mail **freeandreduced@cfisd.net**
3. **Do I need to fill out an application for each child?** No. Use one Free and Reduced Price School Meals Application for all students in your household. **We cannot approve an application that is not complete**, so be sure to fill out all required information. Return the completed application to: **Meal Benefit Manager, 11355 Perry Road, Houston TX 77064**
4. **Should I fill out an application if I received a letter this school year saying my children are already approved for free meals?** No, but **please read the letter you got carefully and follow the instructions**. If any children in your household were missing from your eligibility notification, contact this office immediately **281-897-4550 or email; freeandreduced@cfisd.net**.
5. **Can I apply online?** Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit ***schoolcafe.com*** to begin or to learn more about the online application process. Contact **281-897-4550 or email; freeandreduced@cfisd.net** if you have any questions about the online application.
6. **My child's application was approved last year. Do I need to fill out a new one?** Yes. Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
7. **I get WIC. Can my children get free meals?** Children in households participating in WIC may be eligible for free or reduced-price meals. Please send in an application.
8. **Will the information I give be checked?** Yes. We may also ask you to send written proof of the household income you report.
9. **If I don't qualify now, may I apply later?** Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced-price meals if the household income drops below the income limit.
10. **What if I disagree with the school's decision about my application?** You should talk to school officials. You also may ask for a hearing by calling or writing to: **Mr. Darin Crawford, Assistant Superintendent of Support Services, P.O Box 692003, Houston TX 77269-2003, 281-897-3848.**
11. **May I apply if someone in my household is not a U.S. citizen?** Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced-price meals.
12. **What if my income is not always the same?** List the amount that you normally receive. For example, if you normally make $1000 each month, but you missed some work last month and only made $900, put down that you made $1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
13. **What if some household members have no income to report?** Household members may not receive some types of income we ask you to report on the application or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
14. **We are in the military. Do we report our income differently?** Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
15. **What if there isn't enough space on the application for my family?** List any additional household members on a separate piece of paper and attach it to your application. Contact **281-897-4550 or email; freeandreduced@cfisd.net** to receive a second application.
16. **My family needs more help. Are there other programs we might apply for?** To find out how to apply for SNAP or other assistance benefits, contact your local assistance office or call **211.**

If you have other questions or need help, call **281-897-4550.**

Sincerely,

Suzy Hunter
Nutrition Services Director

HOW TO APPLY FOR FREE AND REDUCED PRICE SCHOOL MEALS

Please use these instructions to help you fill out the application for free or reduced price school meals. You only need to submit one application per household, even if your children attend more than one school in **Cy-Fair ISD.** The application must be filled out completely to certify your children for free or reduced price school meals. Please follow these instructions in order! Each step of the instructions is the same as the steps on your application. If at any time you are not sure what to do next, please contact **281-897-4550.**

PLEASE USE A PEN (NOT A PENCIL) WHEN FILLING OUT THE APPLICATION AND DO YOUR BEST TO PRINT CLEARLY.

STEP 1: LIST ALL CHILDREN IN SCHOOL IN THE HOUSEHOLD.

Tell us how many children in school live in your household. They do NOT have to be related to you to be a part of your household. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.

Who should I list here? When filling out this section, please include ALL members in your household who are:

- Children age 18 or under AND are supported with the household's income;
- In your care under a foster arrangement, or qualify as homeless, migrant, runaway, or Head Start.

A) **List each student's name.** Print each child's name. Use one line of the application for each child. When printing names, write one letter in each box. Stop if you run out of space. If there are more children present than lines on the application, attach a second piece of paper with all required information for the additional children.

B) **Do you have any foster children?** If any children listed are foster children, mark the "Foster Child" box next to the child's name. If you are ONLY applying for foster children, after finishing STEP 1, go to STEP 4. Foster children who live with you may count as members of your household and should be listed on your application. If you are applying for both foster and non-foster children, go to step 3.

C) **Are any children homeless, migrant, runaway, or Head Start?** If you believe any child listed in this section meets this description, mark the corresponding box next to the child's name and complete all steps of the application.

STEP 2: DO ANY HOUSEHOLD MEMBERS (INCLUDING YOU) CURRENTLY PARTICIPATE IN ONE OR MORE OF THE FOLLOWING ASSISTANCE PROGRAMS: SUPPLEMENTAL NUTRITION PROGRAM (SNAP), TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF), OR FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDPIR)?

A) **IF NO ONE IN YOUR HOUSEHOLD PARTICIPATES IN ANY OF THE ABOVE LISTED PROGRAMS: Circle 'NO' and proceed to STEP 3 on these instructions and STEP 3 on your application.**

B) **IF ANYONE IN YOUR HOUSEHOLD PARTICIPATES IN ANY OF THE ABOVE LISTED PROGRAMS: Circle 'YES' and provide the case number.** You only need to write **one** case number. If you participate in one of these programs and do not know your case number, contact **your local assistance office or call 211**. You **must** provide a case number on your application if you circled "YES". **Skip to STEP 4.**

STEP 3: REPORT INCOME FOR ALL HOUSEHOLD MEMBERS.

A) **LIST ALL HOUSEHOLD MEMBERS (including yourself and students listed in Part 1)** who are living with you and share income and expenses, even if they are not related and even if they do not receive income of their own.

- **Do not include** people who live with you but are not supported by your household's income AND do not contribute income to your household.

B) **REPORT TOTAL INCOME** for each household member listed for each source provided. Report all income in whole dollars. Do not include cents. If they do not receive income from any source, write "0". If you write "0" or leave any income fields blank, you are certifying (promising) that there is no income to report. Mark how often each type of income is received by using the boxes to the right of each field.

- **Report all amounts in GROSS INCOME ONLY.** Gross income is the total income received before taxes; many people think of income as the amount they "take home" and not the total, "gross" amount. Make sure that the income you report on this application has NOT been reduced to pay for taxes, insurance premiums, or any other amounts taken from your pay.
- **What if I am self-employed?** Report income from that work as a net amount. This is calculated by subtracting the total operating expenses of your business from its gross receipts or revenue.

C) **REPORT TOTAL HOUSEHOLD SIZE.** Enter the total number of household members in the field "Total Household Size (Children and Adults)." This number MUST be equal to the number of household members listed in STEP 3. If there are any members of your household that you have not listed on the application, go back and add them. It is very important to list all household members, as the size of your household affects your eligibility for free and reduced price meals.

D) **PROVIDE THE LAST FOUR DIGITS OF YOUR SOCIAL SECURITY NUMBER.** The household's primary wage earner or another adult household member must provide the last four digits of his/her Social Security Number in the space provided. You are eligible to apply for benefits even if you do not have a Social Security Number. If no adult household members have a Social Security Number, leave this space blank and mark the box to the right labeled "Check if no SSN."

STEP 4: CONTACT INFORMATION AND ADULT SIGNATURE

All applications must be signed by an adult member of the household. By signing the application, that household member is promising that all information has been truthfully and completely reported. **Before completing this section, please also make sure you have read the privacy and civil rights statements at the bottom of these instructions.**

A) **PROVIDE YOUR CONTACT INFORMATION.** Write your current address in the fields provided if this information is available. If you have no permanent address, this does not make your children ineligible for free or reduced price school meals. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.

B) **PRINT AND SIGN YOUR NAME.** Print your name in the box "Printed name of adult completing the form." And sign your name in the box "Signature of adult completing the form.

C) **WRITE TODAY'S DATE.** In the space provided, write today's date in the box.

D) **SHARE CHILDREN'S RACIAL AND ETHNIC IDENTITIES (OPTIONAL).** At the bottom of the application, we ask you to share information about your children's race and ethnicity. This field is optional and does not affect your children's eligibility for free or reduced price school meals.

Privacy Act Statement: This explains how we will use the information you give us.
The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly.
In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.
To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.
USDA is an equal opportunity provider, employer, and lender.

Cy-Fair ISD
2026 - 2027 Multi-Use Application for Free and Reduced Price Meals
Complete one application per household. Please use a pen (not a pencil).

Apply online at
https://schoolcafe.com

STEP 1 — List ALL Children Attending School

Student ID (optional)	Last Name	First Name	MI	Date of Birth (optional)	School Code	Grade (Optional)	Foster	Homeless	Migrant	Runaway	Head Start

Note: Students enrolled in schools participating in the Community Eligibility Provision (CEP) will receive no cost meals regardless of the completion or eligibility determination of this application.

STEP 2 — Assistance Programs

Do any household members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR? **Circle one**: Yes / No

If you answered NO > Complete STEP 3. **If you answered YES** > Write an Eligibility Determination Group Number (EDG) then skip to STEP 4.

EDG Number:

STEP 3 — All Household Member Income (Skip this step if you answered 'Yes' in STEP 2)

List all household members (including yourself) **even if they do not receive income**. For each household member listed, report total income for each source in whole dollars only. If they do not receive income from any source, write '0'. If you write '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Gross income and how often it is received: **W** = Weekly, **E** = Every 2 weeks, **T** = Twice per month, **M** = Monthly

Household Member Name (First and Last)	Earnings from Work	How Often? W E T M	Public Assistance / Child Support / Alimony	How Often? W E T M	Pensions / Retirement / All Other Income	How Often? W E T M
		W E T M		W E T M		W E T M
		W E T M		W E T M		W E T M
		W E T M		W E T M		W E T M
		W E T M		W E T M		W E T M
		W E T M		W E T M		W E T M
		W E T M		W E T M		W E T M
		W E T M		W E T M		W E T M

Total Household Size (Children and Adults)

Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Another Adult Household Member *** -** -

Check if no SSN

STEP 4 — Contact Information and Adult Signature

"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws."

Printed name of adult completing the form

Signature of adult completing the form X

Today's Date M M D D Y Y

Street Address (if available)

City

State T X

ZIP Code

Home Phone Number

Work Phone Number

Email

6096

Cy-Fair ISD Food Service Department 11355 Perry Rd. Houston TX 77064, (281) 897-4550

HAVE YOU PAID YOUR DUES?

Support Warner PTO's BACK-TO-SCHOOL DRIVE!

Starting at just $10 per family,
your support helps Warner PTO provide:

- TEACHER APPRECIATION EVENTS
- PROGRAMS WE SUPPORT AT OUR SCHOOL
- FAMILY EVENTS THROUGHOUT THE YEAR
- CAMPUS IMPROVEMENTS & BEAUTIFICATION
- CLASSROOM SUPPORT FOR TEACHERS
- FUN SURPRISES FOR OUR STUDENTS

EVERY PAID SUPPORTER RECEIVES
PTO VOTING ELIGIBILITY FOR THE 2026–2027 SCHOOL YEAR

PLUS: AN EXCLUSIVE THANK-YOU GIFT BASED ON YOUR SUPPORT LEVEL!

★ YOUR SUPPORT. YOUR PERKS. ★

$150	PLATINUM SUPPORTER	EVERYTHING BELOW, PLUS **FREE BIRTHDAY MARQUEE**
$100	GOLD SUPPORTER	EVERYTHING BELOW, PLUS **FREE VINTAGE SHIRT**
$75	SILVER SUPPORTER	EVERYTHING BELOW, PLUS **FREE YARD SIGN**
$50	BRONZE SUPPORTER	EVERYTHING BELOW, PLUS **FREE CAR MAGNET**
$10	SUPPORTER CIRCLE	PTO VOTING ELIGIBILITY **FREE NOTEPAD & PEN**

Together, we make Warner Elementary even better! ♡

SIGN UP TODAY AT
WWW.WARNERPTO.ORG

THANK YOU FOR SUPPORTING WARNER PTO!

WE HAVE PARTNERED WITH

LabelDaddy®

TO HELP ELIMINATE THE ITEMS THAT END UP IN OUR LOST AND FOUND.

Steps to order:

1. Visit LabelDaddy.com
2. Click “SUPPORT A FUNDRAISER”
3. Search for “Warner Elementary”
4. Begin Shopping!

Warner will receive 25% of all purchases!



SCAN ME





GET Connected!

FOLLOW US ON SOCIAL MEDIA!

facebook

Warner Elementary CFISD

Instagram

warner.spike

@WarnerCFISD

#SPIKEYOURKNOWLEDGE

CYPRESS FAIRBANKS
INDEPENDENT SCHOOL DISTRICT
LEARN • EMPOWER • ACHIEVE • DREAM

SCHOOL ABSENCE NOTE

Please explain why your child was absent and return this form to the school within three days.

Please excuse _____

Student's First and Last name

from school on _____ .

Month/Day(s)/Year

My child was absent because of (check one):

- ☐ Illness
- ☐ Doctor or Dentist Appointment

Other: _____

_____

_____

_____

_____

_____ _____/_____/_____

Parent/Guardian Signature ***Today's Date***

FOR OFFICE USE ONLY

Date Received: _____/_____/_____

Attendance Secretary entered in eSchool as: Excused Unexcused _____

Circle One ***Initials***

CYPRESS FAIRBANKS INDEPENDENT SCHOOL DISTRICT

2026-2027 DISTRICT CALENDAR

'26

JULY

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

AUGUST

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

SEPTEMBER

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

OCTOBER

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

NOVEMBER

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

DECEMBER

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

'27

JANUARY

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

FEBRUARY

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						

MARCH

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

APRIL

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

MAY

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

JUNE

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

IMPORTANT DATES

Aug. 3-11
Professional Days

Aug. 12
First Day of School

Sept. 7
Student/Staff Holiday

Oct. 9
Teacher Work Day/School Closure Make-up Day/Student Holiday/ Inclement Weather Day

Oct. 12-16
Student/Staff Holiday

Nov. 3
Teacher Work Day/ School Closure Make-up Day/ Student Holiday

Nov. 23-27
Student/Staff Holiday

Dec. 21 - Jan. 1
Student/Staff Holiday

Jan. 4
Professional Day

Jan. 18
Student/Staff Holiday

Feb. 15
Professional Day

March 12
Teacher Work Day/School Closure Make-up Day/Student Holiday/ Inclement Weather Day

March 15-19
Student/Staff Holiday

March 26
Student/Staff Holiday

April 26
Professional Day

May 27
Last Day of School

May 28
Professional Day

May 31
Student/Staff Holiday

GRADING PERIODS

Elementary	Secondary
Aug. 12-Oct. 8	Aug. 12-Oct. 8
Oct. 19-Dec. 18	Oct. 19-Dec. 18
Jan. 5 – March 11	Jan. 5 – March 11
March 22-May 27	March 22-May 27

LEGEND

- Student/Staff Holiday
- Professional Day/Student Holiday
- First and Last Days of School
- Inclement Weather Day
- Teacher Work Day/School Closure Make-up Day/ Student Holiday

ACCESS

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