

# AMPHITHEATER PUBLIC SCHOOLS FOOD SERVICE 2018/2019

## CONSENT FOR SHARING INFORMATION WITH OTHER PROGRAMS

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Dear Parent/Guardian:

**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.**

No! I **DO NOT** want information from my Free and Reduced-Price School Meals Application shared with any of these programs.

Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **Summer School and PAL/ASAP**.

Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **Extracurricular Activities (Middle and High School Only)**.

Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **District Offices for Curriculum and Testing (Middle and High School Only)**

**If you checked yes to any or all of the boxes above, fill out the form 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: \_\_\_\_\_

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For more information, you may the Amphitheater Food Service Office at **(520) 696-5133** or e-mail our office at **[jheiser@amphi.com](mailto:jheiser@amphi.com)**

Return this form to: **Amphitheater Public Schools Cafes**

Mailing Address: **Amphitheater Public Schools  
701 W Wetmore Rd Tucson, AZ 85705**

Physical Address: **Amphitheater Public Schools  
200 E Roger Rd Tucson AZ 85705**

*This institution is an equal opportunity provider.*