

Meal Plan Opt Out Form 2017

My child, _____, will not be participating in the meal plan. By opting out, I understand my student will not be provided a meal by the band backers prior to football games or competitions. I understand I will need to provide a meal for my student prior to these activities.

Parents Name

Parents Signature

Date

Return completed form to Lisa Statkevich at lisamrin@cox.net