

Mt. Greylock Regional School District
Request for Waiver of Participation Fees

Date of Application for Waiver: ____ / ____ / ____

Student Name: _____

Grade: _____

Activity/Organization (list all): _____

Is this a **required** class Field-Trip? YES or NO

Advisor/Coach Name: _____

Parent Name: _____

Parent Mailing Address: _____

Parent Phone: _____

*I (Parent) am requesting a participation fee waiver for my son/daughter. **I have attached a copy of the first page of my most recent Federal Income Tax Return (showing income and dependents) to provide documentation;** -OR - **have completed the Free and Reduced Lunch Form.***

I understand that waivers are considered based upon the National Free/Reduced Lunch Income Guidelines issued by the Federal Government; Therefore, I have completed and submitted the Free/Reduced Lunch Application provided by the school front office on:

Date; ____ / ____ / ____ (RETURN Lunch Form to Principals office to be considered for waiver)

Parent Signature

Date

Please return this completed form to the Business Manager in the District Office.

Waiver Eligible (automatic- Free/Reduced Eligibility)

Waiver Denied

Signed Director of Business

Date

Signed Athletic/Co-Curricular Director

Date