

 25 years of service

 1985-2010

**Innovate**

**Educate**

**Support**

**The Linn-Mar School Foundation**

2999 North 10th Street, Marion, IA 52302

319-447-3065 fax 319-377-9252

www.linnmarfoundation.org

**Parent Waiver Statement**

**AAA (Triple A) Fund**

The AAA Fund provides grants for students with financial need so they can participate in Linn-Mar ***academic***, ***athletic*** and extracurricular ***activity*** programs. Students are referred to the AAA Fund through sponsoring coaches, teachers, or counselors. Covered costs include equipment, costume and uniform costs or other expenses associated with participation in the activity.

Participation in Linn-Mar’s free and reduced lunch program is sufficient support for the Fund’s “financial need” requirement. By completing and signing the following waiver statement, you give the Linn-Mar school district permission to release this information to the Foundation.

I understand that I will be releasing information that will show that I applied for free and reduced price school meals for my child. I give up my rights to confidentiality for AAA Fund consideration only. This information will be released to the Linn-Mar School Foundation’s Executive Director and Fund Distribution Committee exclusively.

I certify that I am the parent/guardian of the child for whom this waiver is being made.

Student name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_