



Sibling Match Form

New students to a Bay District School who have siblings that **CURRENTLY** participate in the **Free or Reduced Lunch Program** may qualify to eat on the sibling's prior year status for the first 30 days of the new school year **or until a new lunch application is processed.** All students **must** reside at the same address.

If you have children that attend a Bay District School and **currently** participate in the Free or Reduced Lunch Program, please complete the form below and email to FSSupport@bay.k12.fl.us:

Name of Sibling(s) **currently** in the Free & Reduced program:

<u>Sibling Name:</u>	<u>Date of Birth:</u>	<u>Student ID:</u>	<u>School:</u>
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____

Name of **NEW** Student(s), Date of Birth, Student ID (if enrolled) and school **NEW** student will be attending:

<u>Sibling Name:</u>	<u>Date of Birth:</u>	<u>Student ID:</u>	<u>School:</u>
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____

Parent/Guardian Name: _____

Family Address: _____

Contact Phone Number: _____

- **NOTE:** Free/Reduced lunch applications for the 2024/2025 school year will be available by August 1, 2024. If you have questions, please email at: FSSupport@bay.k12.fl.us.