

# Bookstore Privileges

Parents, please select the level of privileges you would like your student to have at the school bookstore. If at anytime you would like to change your preferences, simply email Meagan Greene (mgreene@idyllwildarts.org) in the Finance Office, and the changes will take place immediately.

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

Student number: \_\_\_\_\_

Preference of privileges (please check one):

Full privileges

Food/drinks and school supplies only

Drinks and school supplies only

School supplies and water only

Other \*

\* If other, please describe:

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Parent or Guardian name and signature:

Name: \_\_\_\_\_

Signature \_\_\_\_\_