

<i>Parent Affirmation Form</i>			
<i>Military Mailing List Opt Out</i>			
I wish for my child, a junior or senior, to be excluded from mailing lists provided to all branches of the United States military.			
Student Name:		School:	
Student ID#:	Grade Level:	Gender:	
Parent/Guardian Signature:			Date:
18-Year-Old Students			
I am a junior or senior and I wish to be excluded from mailing lists provided to all branches of the United States military.			
Student Name:		School:	
Student ID#:	Grade Level:	Gender:	
Student Signature:			Date:
This completed form must be returned to the counselor or register at your school.			