

RESIDENCY AFFIDAVIT AND AGREEMENT

I attest that I am the legal guardian of the child/children listed below:

Name _____ DOB _____

Name _____ DOB _____

Name _____ DOB _____

and that I and the above-named child/children are legal residents of and reside in the Town of _____
_____. Our physical address is: _____

I have been residing at this address since _____. I intend that I shall continue as a resident of that town during the 2019-2020 SY

I agree that, immediately upon any change in my residency or the residency of my children, I shall inform the Head of School of Capital City Public Charter School

The facts set forth in this residency affidavit are true and complete. I understand that providing misleading or false information about residency is a criminal offense.

Date

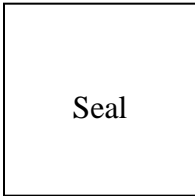
Printed Name

Signature

STATE OF NEW HAMPSHIRE
COUNTY OF _____, SS.

On this _____ day of _____, 20____, personally appeared the above-named _____, known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same for the purposes therein contained.

Before me,



Notary Public/Justice of the Peace