RESIDENCY AFFIDAVIT AND AGREEMENT

I attest that I am the legal guardian of the child/children listed below:			
Name	DOB		
Name	DOB		
Name	DOB		
	lren are legal residents of and reside in the Town of 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 2018-2019 school year. I agree that, immediately upon any change in my residency or the residency of my children, I shall inform the Principal of Strong Foundations 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.			
, k	20, personally appeared the above-named known to me or satisfactorily proven to be the person whose name acknowledged that he/she executed the same for the purposes		
Before me,			
	Notary Public/Justice of the Peace		
Seal			