

MIDDLE COUNTRY CENTRAL SCHOOL DISTRICT

STATE OF NEW YORK
COUNTY OF SUFFOLK

REGISTRATION AFFIDAVIT

The following person(s) _____

Reside(s) at _____

which is within the boundaries of the Middle Country Central School District. In the event that the Middle Country Central School District determines that the above person(s) does not reside at this address or has moved out, I understand that I will be liable for tuition for each student that attended the Middle Country Central School District and at that time the student (s) will be dropped from the attendance register and will no longer be allowed to attend school within the Middle Country Central School District.

Your deponent understands that this affidavit is made under oath; that the statements are true; that the Middle Country Board of Education will rely thereon and, if the information provided in the affidavit is false, the student will not be permitted to attend the district. The district will then take legal action to recover tuition and a referral will be made to the Suffolk County District Attorney's office for fraudulent misrepresentation.

Signature of Deponent (Homeowner)

Print Name

Telephone Number

Document provided by Homeowner:
___ Property Tax Bill: must be presented to MCCSD
Central Registration Office

Taken and Sworn to before me this
_____ day of _____, 20 ____

Notary Public