

Wayland Public Schools 41 Cochituate Road Wayland, Massachusetts 01778

Landlord/Owner of Property/Affidavit

Property Owner Inform	matian	
Name:	mation	Relationship to Family:
Address:		Relationship to Fahiny.
Home Phone:	Cell Phone:	Email Address:
Home I none.	Cen i none.	Linuii / Iddiess.
I am the owner of the pro	perty at	, Wayland, MA and
1		dress)
	`	*
acknowledge that the foll	owing person(s) will be residing	ng at the above address and the minor children will be
registering for school in V		
<i>C C</i>	,	
Name of Parent(s)/Gua	ardian(s):	
Home Phone:	Cell Phone:	Email Address:
Please list all minor ch	ildren living with the Parent	(s)/Guardian(s) listed above.
Name:		Date of Birth:
- 133222		
Expected dates of resid	lency for this family at the ac	Idraes listad ahova:
From:	To	
1 TOIII.	10	•
I avvious under mains and m	analtics of manipus, that the ana	views above and two and accounts. I understand that it is now
		wers above are true and accurate. I understand that it is my e is a change in the residency of this family.
obligation to inform the v	wayland Public Schools II thei	e is a change in the residency of this family.
Signature of Pro	norty Owner	Date
Signature of 110	operty Owner	Date
	COMMONWEALTH OF M	IASSACHUSETTS, MIDDLESEX, SS.
	COMMONWEALTH OF W	IASSACHOSETTS, WIIDDLESEA, SS.
Subscribed and sworn to	me, thisday of	20
Subscribed and sworm to	me, unsaay or	, 20
Notary Public		My Commission Expires
Trotal y T dolle		Tity Commission Expires
(Please print or stamp nar	me)	
, and promise in	-,	Notary Seal