



### ENROLLMENT FORM: Dayton

Submission by April 15 ensures enrollment at TAMS.

<b>Enrollment Statement</b>			
Please enroll my child, _____, at			
<i>First name</i>	<i>MI</i>	<i>Last name</i>	
Thornton Academy Middle School (TAMS) for 2019-20			
He/she will enter Grade:    6       7       8    ( <i>Please circle</i> )			

#### Permission to access records

To assist Thornton Academy in planning an appropriate educational program for my child, I hereby authorize Thornton Academy to access his/her cumulative educational records.

#### Authorizing signature(s)

I understand that Thornton Academy will use student information for the sole purpose of assuring and/or planning an appropriate educational program at Thornton Academy Middle School. I understand that I may revoke this authorization at any time. In any case, this authorization will automatically expire one year from the date signed.

\_\_\_\_\_  
*Parent/Guardian's Signature*                      *Date*

\_\_\_\_\_  
*Parent/Guardian's Signature*                      *Date*

\_\_\_\_\_  
*Mailing address*

\_\_\_\_\_  
*Physical address (if different)*

\_\_\_\_\_  
*Email address*

\_\_\_\_\_  
*Best telephone*                      *Alternative telephone (if any)*

#### Submit

By email: [debbie.crepeau@thorntonacademy.org](mailto:debbie.crepeau@thorntonacademy.org)

By mail:     Debbie Crepeau  
                 Thornton Academy Middle School  
                 438 Main Street  
                 Saco, ME 04072

**Questions?** Please do not hesitate to call (207-602-4408)

**We look forward to being partners with you in your student's middle school education!**