

**Pelham Public Schools
629 Fifth Ave.
Pelham, New York
10803**



RESIDENT AFFIDAVIT

I, _____ do solemnly swear under penalty of perjury
that I am a resident of _____
with my child/children _____.

I also understand that the Pelham Union Free School District will seek restitution
for tuition if it is determined that my child was admitted as a resident of the Pelham
Union Free School District and it is later determined that such information was false.

Signature of Parent/Guardian _____

Sworn to before me this ____ day of _____

Notary Public