

AFFIDAVIT AFFIRMING RESIDENCY

The undersigned, being duly sworn and under oath, hereby make(s) affidavit and say(s) that she(he)(they) is(are) resident(s) of the Town of Barrington, Rhode Island, where she(he)(they) has(have) her(his)(their) usual and regular place of abode at number \_\_\_\_\_ Street, together with the following child(children) of whom she(he)(they) *(address)* is(are) either the natural parent(s), legal guardian(s), or, if neither, has(have) physical custody:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The residence of said child(children) with me(us) has not been established solely for the purpose of making him(her)(them) eligible for attendance at the Barrington Public Schools.

I(we) acknowledge that I(we) submit this affidavit in order to establish the right of said child(children) to attend Barrington Public Schools and that I(we) have been advised that a false affidavit submitted for this purpose will result in appropriate civil and/or criminal proceedings seeking money damages and such other penalties as may be prescribed by law.

\_\_\_\_\_  
*Signature of Home Owner (required)*

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My Commission Expires: \_\_\_\_\_