

**AYD Academy**  
**2017 AYD Academy APPLICATION FOR ENROLLMENT**



**PLEASE PRINT ALL INFORMATION.**

**Return all signed forms and registration fee to AYD Academy, Secondary C&I, Attn: Carol McDowell, 500 Laser Rd, Rio Rancho, NM, 87124**

**STUDENT INFORMATION**

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Male \_\_\_\_\_ Female

Address \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**SCHOOL INFORMATION**

School Attended 16-17  LMS  ERMS  RRMS  MVMS

School Attending 17-18  CHS  RRHS  Cyber Academy

Rio Rancho Public Schools student, please provide Student ID number \_\_\_\_\_

**EMERGENCY INFORMATION**

Name of Parent or Guardian \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

**Name of Emergency Contact:** \_\_\_\_\_

Address of Contact \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Relationship to Student \_\_\_\_\_

Phone Numbers \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_ Cell Phone \_\_\_\_\_

**SUMMER SESSION CONTRACT**

As a condition of admission, Student and Parent/Guardian acknowledge receipt of the Summer Session Parent Reference, and agree to comply with the rules and provisions it contains. **Signatures required.**

Signature of Student \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ RRPS Employee? Yes No

**OFFICE USE ONLY**

Registration Date	Early	General	Late		
Payment: _____	_____	_____	_____	Money Order Number	Balance
Date _____				Receipt No.	
Amount _____				_____	_____
_____				_____	_____