

AYD Academy
2018 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 17-18 **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: Date Amount	Money Order Number	Receipt No.	Balance		
_____	_____	_____	_____	_____	_____