



Oakwood Adventist Academy

7000 Adventist Blvd., Huntsville, AL 35896 • 256/726-7010 • Fax 256/837-2753

OUT-OF-TOWN LIVING AGREEMENT

20__ - 20__

To be completed by the Parent:

PERMANENT HOME INFORMATION

Date: _____

Student: _____ Male / Female Grade: _____ DOB: _____

Address: _____ City _____ State _____ Zip _____

Parent(s) Phone	Mother:	Father:
Home		
Work		
Cell		

We/I do hereby give temporary custody for _____ to reside with _____ during the 20__ - 20__ school year. This individual will represent **us/me** concerning grades, discipline, and/or medical concerns.

If possible, contact **us/me** for medical and discipline concerns. ____Yes ____No

Mother's Signature: _____ **Date** _____

Father's Signature: _____ **Date** _____

LOCAL INFORMATION

_____ will reside with _____ at

Address: _____ City _____ State _____ Zip _____

Guardian Phone	Female:	Male:
Local Home		
Local Work		
Local Cell		
Email Address		

We/I do hereby agree to provide temporary custody for _____ to

Student Name

reside with **us/me** during the 20__ - 20__ school year. **We/I** _____

Guardian/s Name

will represent _____ concerning grades, discipline, and/or medical concerns.

Student Name

Guardian's Signature: _____ **Date:** _____

State of _____ County of _____

Signature of Notary _____ Notary's Exp. Date _____

Notary Seal

Today's Date _____