

The Academy for Academic Excellence

Change of Address/Phone Number/Contacts

Student Name (First)	(MI)	(Last)	(Current Grade)	(Sex M/F)
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Student Name (First)	(MI)	(Last)	(Current Grade)	(Sex M/F)
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Student Name (First)	(MI)	(Last)	(Current Grade)	(Sex M/F)
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Student Name (First)	(MI)	(Last)	(Current Grade)	(Sex M/F)
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Parent Name (First)	Last)
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(New Address)	(City/State/Zip)	(Phone)
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_____ **Current Cell**

Emergency Contacts

Add/Remove (circle one) _____

Name	Relationship	Telephone
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Add/Remove (circle one) _____

Name	Relationship	Telephone
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Add/Remove (circle one) _____

Name	Relationship	Telephone
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Parent Signature _____ **Date** _____

Return to the Registrar when completed.