



Waynesboro Area School District

210 Clayton Avenue
Waynesboro, PA 17268
717-762-1191

Multiple Occupancy Affidavit

Owner/Lessee

Date: _____

I, _____, hereby state that I am the Owner/Lessee of the residence located at _____ and that

Address of Residence

_____ is/are sharing the house/apartment with me for a stipulated sum payable for rent. My relationship to the student is _____.

Should _____ move from my house/apartment whether

Name of Parent and Student

within the Waynesboro School District or not, I shall notify the School District. Resident and

Waynesboro further agree that if, at any time, the facts as set forth in the Affidavit are found to be

incorrect, Waynesboro shall have no obligation to continue to educate _____

in its school system either on a free or tuition basis. I further understand and agree that, should

_____ be found to be attending any Waynesboro School illegally, the

District may file suit against myself and the student's parent(s) in a court of law to recoup tuition costs.

This form is only valid for the current school year

Period covered by the affidavit is from _____ to _____

Signature of Resident

Commonwealth of Pennsylvania
County of _____.

Notary Contact Information	
Name:	_____
Phone:	_____

Sworn to and subscribed before me, on this _____ day of _____, 20____.

Notary Public