CANTERBURY PUBLIC SCHOOLS Office of the Superintendent 45 Westminster Road, Canterbury, CT 06331 Phone (860) 546-6950 FAX (860-656-6434

PERMISSION TO REGISTER 2025-2026

(To be completed by parent/guardian	1)	
As a parent/guardian, I certify that		resides with me and I am a resident
	(Name of student)	
of the Town of Canterbury. I am awai	re that documentation of residency wil	ll be required.
Name of parent/guardian		
Mailing address (street number & nan	ne)	
Home or cell phone number	Emergen	cy number
Email Address		
		Female
Choice of high school (See list below)		Entering Grade
Currently or has received service Sp		No No
	04 Accommodations Yes	
◯ Initial entry ◯ Transfer		
Signature of parent/guardian		Date
	PLEASE DO NOT WRITE IN GRAY AREA	
	BE COMPLETED BY SUPERINTENDENT : has permission to register for the 202	
This certifies that the above student	inas permission to register for the 202	25-2026 School year at.
	roviding transportation $\underline{\hspace{1.5cm}}$ $\underline{\hspace{1.5cm}}$ and Pa	
	Killingly Regional Agriculture Ed	
Norwich Free Academy	Norwich Technical High School	() Woodstock Academy
Canterhury will not be responsible f	or providing transportation to the fol	lowing choice high schools
Payment of tuition V	Windham Technical School	Parish Hill High School
-	QMC	ACT
	Griswold High School	
Dr. Christophor Bits and		Doto
Dr. Christopher Bitgood Superintendent of Schools		Date

For High School Transportation Information - Please visit our website at: www.canterburypublicschools.org/transportation for bus times and other information.

cc: Transportation
Business office