



**STATEMENT OF INTENT TO ENROLL  
AT  
THETFORD ACADEMY**

FOR THE 2010-2011 SCHOOL YEAR

STUDENT NAME: \_\_\_\_\_

ENTERING GRADE: \_\_\_\_\_ IN FALL 2010

PARENT/GUARDIAN NAMES: \_\_\_\_\_

TOWN OF RESIDENCE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

This statement of intent will be used for planning student enrollment numbers. We ask that all statements be submitted by March 12, in order to begin formatting schedule patterns for new students. Course registration forms and other materials will be mailed to you at the address you've listed above.

**PLEASE SIGN TO INDICATE YOUR INTENT TO ENROLL AT THETFORD ACADEMY:**

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN THIS TO YOUR SCHOOL  
OR MAIL DIRECTLY TO THETFORD ACADEMY:  
P.O. Box 190  
Thetford, VT 05074

**BY FRIDAY, MARCH 12, 2010.**

We will accept statements of intent after March 12 but cannot guarantee the best course schedule options for those who enroll later.

*This statement is for new student enrollments only. Current students do not need to submit this form.*