

Brighton Central School District Form

Resident Moving Within the District

Proof of residency must accompany this form

Please visit www.bcsd.org/registration for accepted documentation

Parent(s)/Guardian(s) Name: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Old Address: _____

New Address: _____

Is there a home phone # that will be transferred? _____

Best # to contact you at: _____

New address will be current on what date? _____

Type of Proof of Residency presented: _____

Have you filled out a new transportation form? _____

Parent/Guardian Signature: _____

You may email your address change with documentation to:

Registration@bcsd.org or call 585-242-5200 X5580 if you have questions.