



Authorization for Release of Records

*Please complete this form and submit it to your child's **previous** school.*

My child, _____ has
been accepted to Cape Cod Academy for the 2022-2023 school year.

I authorize a transcript release to Cape Cod Academy.

Please forward the following to:

Cape Cod Academy
Registrar's Office
Attn: Laura Curry
50 Osterville-West Barnstable Road
Osterville, MA 02655

Or email to: registrar@capecodacademy.org

- ☐ School Transcript
- ☐ Official Records
- ☐ Health Forms

Thank you.

Signature of Parent/Guardian

Date