



THE
GUNNERY
MR. GUNN'S SCHOOL ESTABLISHED 1850

Release of Student Information

I hereby authorize The Gunnery to release transcripts concerning
to the following:

(Name of Student)

- Educational Institutions
- Scholarship Programs
- NCAA Clearinghouse
- College Athletic Offices
- Other _____

Parent/Guardian Signature
(if student/former student is under age 21)

Date

Parent/Guardian please print name

Signature (21 years or older)

Date

Please print name

Please return this completed form to:

Peggy Small, Registrar
The Gunnery
99 Green Hill Road
Washington, CT 06793
Fax: (860) 868-0830