



Thank you for choosing Community Presbyterian Nursery School! We are so happy you will be joining us. To register your child, please read and initial each statement below and sign your name at the bottom. Then complete the attached form with the required information. You will need to submit a non-refundable registration fee of **\$65** in cash or a check made out to Community Presbyterian Nursery School. If you are registering 2 children from the same family, the non-refundable registration fee is \$100. Please use one form for each child. We also require the first month of tuition by August 1st. Tuition is collected the 1st of each month from August through May. If you are registering a child of a church member, you will receive a 10% discount on tuition. All families that register 2 children will receive a 5% discount on the tuition amount which is the lesser of the two amounts.

By initialing each statement, you are agreeing to each directive.

1. _____ I understand that this is a proposed schedule. Due to possible changes made by the state, health department or state licensing department programs, class size, class times and entry criteria may be adjusted as necessary.
2. _____ I understand that in the event my child(ren) will need to be withdrawn from Community Presbyterian Nursery School for any reason, I must give 30 days written notice. If 30 days written notice is not received by the Director, I understand I am financially responsible for the upcoming month of tuition.
3. _____ I understand that Community Presbyterian Nursery School is a full year program from September through June and not a month to month program. If you have unexpected circumstances that arise, please speak to the Director.
4. _____ I understand that tuition is paid on the first of each month from August 1st through May 1st. If payment is received after the 10th of the month, a late fee will be applied.

Print Parent/Guardian's Name: _____ Date: _____

Parent/Guardian's Signature: _____

Office Use Only: Date Received: _____ Start Date: _____ Confirmation Sent: _____

Registration Fee: Check # _____ Amount _____ 1st Month: Check # _____ Amount _____



Registration Form 2022-2023

Child's Name: _____	Male: _____	Female: _____
Date of Birth: _____	Language(s) Spoken At Home: _____	
Home Address: _____		
City, State: _____	Zip Code: _____	
Home Phone #: _____	Child's Nickname: _____	

Would you like to receive information about Community Presbyterian Church? Yes No

FAMILY INFORMATION

Mother's Name: _____	Father's Name: _____
Occupation: _____	Occupation: _____
Work Address: _____	Work Address: _____
Work Phone #: _____	Work Phone #: _____
Cell Phone #: _____	Cell Phone #: _____
Email: _____	Email: _____

Other Children In The Family: (Names and Ages)	
1. _____	_____
2. _____	_____
3. _____	_____

MEDICAL INFORMATION

Child's Doctor: _____	Doctor's Phone #: _____
Doctor's Address: _____	
List Any Allergies: _____	
Do we have your permission to secure emergency medical treatment for your child should the need occur while he/she is in the care of the school? Yes _____ No _____	

EMERGENCY INFORMATION

List 2 people authorized to pick up your child and/or to be contacted in case of an emergency if neither parent is available.

1. Name: _____ Cell #: _____

Address: _____

Relationship To Child: _____

2. Name: _____ Cell #: _____

Address: _____

Relationship To Child: _____

PROGRAMS AND TUITION

Please check off the program you would like to register for. Tuition is paid monthly from August 1st through May 1st.

4 Year Old

Class Options

Monday - Friday, 9:00am to 2:30pm/ \$677 per month _____

Monday - Friday, 9:00am to 12:00pm/ \$465 per month _____

3 Year Old

Class Options

Monday - Friday, 8:45am to 11:45am/ \$570 per month _____

Mon, Wed, Fri, 8:45am to 11:45am/ \$342 per month _____

2 ½ Year Old

Class Option

Tuesday and Thursday, 8:30am to 11:30am/ \$278 per month _____

*If there is sufficient interest, a possible 3rd day could be added
in January (TBD)

PLAYCARE: Playcare will be available for children in the ½ day 3's classes and ½ day 4's class at the rate of \$25 per day. Hours are 11:45am to 2:15pm. A separate invoice will be sent out at the end of each month. Children must bring a lunch from home and a blanket for rest time.

A registration fee is required to secure a spot and is non-refundable. For 1 child the fee is \$65. For 2 or more children in the same family the fee is \$100. Make checks payable to Community Presbyterian Nursery School.

Parent's Signature: _____ Date: _____