

St. Gregory's Nursery School
"Where Your Child Comes First"
Enrollment Application 2019-2020

Child's Birthday: _____ (Month / Day / Year)

Child's Last Name First Name Middle Nickname

Home Address _____

City State Zip

Primary Phone Number & Email Address _____

Emergency Contact Name/Home Phone/Cell Phone _____

2 YR old AM Hours – 9:30-11:30am * 3 & 4 YR old AM Hours – 9:30am-12pm

2 yr old program – 2 days/week: \$230/month__

3 yr old program – 3 days/week: \$275/month__

3 yr old program – 5 days/week: \$305/month__

4 yr old program – 3 days/week: \$275/month__

4 yr old program – 5 days/week: \$305/month__

PROMOTION DISCOUNT
_____ Referral Program

POLICY: A medical certificate is required before admission. In the event of an emergency, I authorize the staff to give immediate first aid. I hereby give permission to the staff to have my child participate in all activities, including the taking and use of pictures connected with our program. These pictures will not be posted online in any form.

HOLIDAYS: St. Gregory's Nursery School follows the Plainedge School District calendar thru June 2020.

NURSERY: \$65 Extra-Curricular Activities and Insurance

I hereby enroll my child in the above-specified program for the school year. I agree to pay \$_____ which shall be the last payment for June, 2020. I understand that no refunds will be made for school closings or sickness absences.

TUITION PAYMENT IS DUE ON THE FIRST OF EVERY MONTH. (\$25 late fee after the 10th of the month.)
\$65 Registration Fee is due at time of registration. Registration Fee is NON-REFUNDABLE & NON-DEDUCTABLE. \$65 extracurricular & insurance, September and June tuition due by June 1st, 2020. We accept the following payments: Cash and Check.

Signature of Parent or Guardian Date

Signature of School Director Date