

Pine Orchard Nursery School

149 South Montowese Street ~ P.O. Box 697 ~ Branford, CT 06405 ~ Telephone (203) 488-3769

www.pineorchardnurseryschool.org



REGISTRATION FORM 2016-2017

Child's Name _____ male or female Date of Birth _____

Address _____

Phone _____ Email _____

Father's Name _____ phone _____ email _____

Mother's Name _____ phone _____ email _____

Child lives with:

both parents mother father other (specify) _____

Children must be toilet trained and turn three by December 31, 2016.

Please circle your choice of days/sessions. You may choose a combination of mornings or afternoons and full day.

Morning Session 9:00 - 12:00 Monday Tuesday Wednesday Thursday Friday

Afternoon Session 12:15 - 3:15 Monday Tuesday Wednesday Thursday

Full Day 9:00 - 3:15 Monday Tuesday Wednesday Thursday

Registration for Friday enrichment classes will be available during the year.

The State of Connecticut requires an up-to-date immunization record and recent physical examination for each child. The school will provide health forms which must be completed before a child begins school. A new physical exam is required yearly.

Does your child have any allergies requiring emergency medication (epi-pen, Benadryl)? Yes No

Sometimes our parents organize social events during the summer. Would you like your name and contact information to be given to other school parents? yes no

Parent/Guardian Signature _____ Date _____

A PLACE WILL BE RESERVED FOR YOUR CHILD IN OUR 2016-2017 CLASS UPON PAYMENT OF A \$50 NONREFUNDABLE REGISTRATION FEE AND A \$100 NONREFUNDABLE DEPOSIT TO BE CREDITED TOWARD TUITION.

Office use only: Child's starting date _____

Pine Orchard Nursery School admits students of any race, color, and national or ethnic origin.