

Pine Orchard Nursery School

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



www.pineorchardnurseryschool.org

2026-2027 Registration Form

Child's Name _____ Gender _____ Date of Birth _____

Address _____

Phone _____ Email _____

Parent/Guardian name: _____ Phone _____ Email _____

Parent/Guardian name: _____ Phone _____ Email _____

Children must be toilet-trained and be 2 years and 9 months by Sept 8, 2025

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

<u>Morning Session 9:00 - 12:00</u>	Monday	Tuesday	Wednesday	Thursday	Friday
<u>Afternoon Session 12:00-3:00</u>	Monday	Tuesday	Wednesday	Thursday	
<u>Full Day 9:00 – 3:00</u>	Monday	Tuesday	Wednesday	Thursday	

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 2025-2026 CLASS UPON PAYMENT OF THE FOLLOWING:

- **\$100 NON-REFUNDABLE REGISTRATION FEE**
- **\$100 NON-REFUNDABLE DEPOSIT TO BE CREDITED TOWARD TUITION**

Office use only: Child's starting date _____

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