

_____ Child's Name

_____ Tuesday-Thursday AM program for 3 year olds (must be 3 by September 30)

9:00-11:30 AM

\$100.00 per month tuition

\$50.00 registration fee

_____ Tuesday-Thursday PM program for 3 year olds (must be 3 by September 30)

12:30-3:00 PM

\$100.00 per month tuition

\$50.00 registration fee

_____ Monday-Wednesday-Friday AM program for Pre-K (must be 4 by September 30)

9:00-11:30 AM

\$130.00 per month tuition

\$50.00 registration fee

_____ Monday-Wednesday-Friday PM program for Pre-K (must be 4 by September 30)

12:30-3:00 PM

\$130.00 per month tuition

\$50.00 registration fee

_____ Monday-Wednesday-Friday AM program for Pre-K (must be 4 by September 30)

9:00-11:30 AM

Additional Tuesday-Thursday **PM** only

12:30-3:00 PM

\$220.00 per month tuition

\$50.00 registration fee

_____ Monday- Friday PM program for Pre-K (must be 4 by September 30)

12:30-3:00 PM

\$220.00 per month tuition

\$50.00 registration fee

A daily snack is included.

Registration fee must accompany completed registration forms.

Registration fee is not refundable.

We request 2 weeks notice for withdrawal from our program.

Please return to All Saints nursery School

5445 Heatherdowns

Toledo, Ohio 43614

Attn: Darlene Stokes

ALL SAINTS NURSERY SCHOOL

ADDITIONAL INFORMATION

CHILD'S NAME _____

E-MAIL ADDRESS _____

You will be given information at times through e-mail.

What do you prefer we call your child at school? _____

This is the name he/she will learn to print.

Siblings _____ Birth date _____

Left handed _____ Right handed _____ Male _____ Female _____

On our parent roster, we also prefer to include children's names & addresses.

I do _____ do NOT _____ want my child's name and address included on the parent roster.

*EMERGENCY TRANSPORTATION (on page 2) In case of an emergency, we will call 911, but the emergency squad must have permission from you to transport your child to a hospital. In this event, you will be notified immediately.