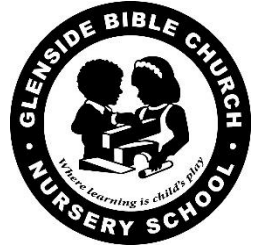


# NURSERY SCHOOL REGISTRATION APPLICATION

447 Keswick Avenue  
Glenside, Pa 19038  
215-887-2289



## CHILD'S INFORMATION

Child's Name: \_\_\_\_\_ Prefers to be called: \_\_\_\_\_ Child's Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

What is your church affiliation? \_\_\_\_\_

## PARENT INFORMATION

• Father's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Work Phone: \_\_\_\_\_

• Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## OTHER MEMBERS OF THE HOUSEHOLD

Name:	Birthdate:	Relationship to child:

## EMERGENCY INFORMATION

Doctor's Name:	Address:	Phone:
Dentist:	Address:	Phone:

## Person to Notify in Case of Illness (other than Parents)

Name:	Phone:	Relationship to Child:

Is your child completely toilet trained? \_\_\_\_\_ Are there any medical or special information that you would like the teacher to know about your child? \_\_\_\_\_

"I agree to the policies of Glenside Bible Church Nursery School as specified in the parent handbook (available online @ [www.glensidebiblechurch.org/nurseryschool](http://www.glensidebiblechurch.org/nurseryschool)). I agree to make tuition payments by the scheduled due date."

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date of Application

(Please return Registration Application, Financial Commitment Form, and \$35 Registration Fee to GBC Nursery School at above address.)

## FINANCIAL COMMITMENT FORM

447 Keswick Avenue  
Glenside, Pa. 19038  
215-887-2289



Child's Name: \_\_\_\_\_

**Please check the program you desire and note your monthly payment commitment.**

- 3 Half Days (Monday, Wednesday, Friday)**  
9 payments of \$222, due September 1<sup>st</sup> through May 1<sup>st</sup>
- 3 Full Days (Monday, Wednesday, Friday)**  
9 payments of \$312, due September 1<sup>st</sup> through May 1<sup>st</sup>
- 4 Half Days (Monday, Wednesday, Thursday, Friday)**  
9 payments of \$278, due September 1<sup>st</sup> through May 1<sup>st</sup>
- 4 Full Days (Monday, Wednesday, Thursday, Friday)**  
9 payments of \$400, due September 1<sup>st</sup> through May 1<sup>st</sup>

**TUITION:** Billing is monthly. Payment is *always* due the first day of the month, from September through May, whether or not a bill is received. Checks should be made payable to **Glenside Bible Church Nursery School**. Payments can be made by mail or deposited in the drop box located outside of the classrooms. **Late payments are subject to a \$25.00 late fee.** Any circumstances delaying payment should be reported to the Church Office or Nursery School Treasurer immediately. Your child's continued enrollment depends on prompt fulfillment of your financial commitment to Glenside Bible Church Nursery School. The school reserves the privilege of dismissing a child if financial obligations are not met.

**REFUNDS:** Fees are not refundable in the event school is called off because of weather conditions. There are no refunds in the event of an absence or illness up through two weeks duration. After two weeks of a child's continuous, prolonged illness, fees will be reduced to one-half until the child returns to school, provided that the parents have notified the Teacher prior to the third week of illness. Paying the reduced rate insures the child's position in the school upon return.

**WITHDRAWAL:** If you wish to withdraw your child from the school, four weeks written notice must be given to the Teacher. Re-enrollment of child who has withdrawn from school is subject to availability.

**I have selected the above program and payment plan and agree to the terms listed.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian