Garden Manor Nursery School of Christ Church

33 Jefferson Street, Garden City, New York 11530

Pat Martin, Administrator (516) 775-2626

2019-2020 Registration Pre-School Three Day Morning

Monday – Wednesday - Friday 9:00-11:30am

I agree to the enrollment of my child in the Garden Manor Nursery School of Christ Church for the **2019-2020** school year. School will open after labor day and close in early June. Specific dates to be determined.

Child's Name	Ν	M or F Birth Date:
Mother's Name		Father's Name
Address:		Address:
(Street)		(Street)
(Town & Zip)		(Town & Zip)
Occupation		Occupation
Home Phone	Cell (Mom)_	E-Mail
Work Phone	Cell (Dad)	E-Mail
Contact person in case of en	norgonas: (other then	poronto)
Primary Name		1 ·
Phone		Phone
**IMP0	DRTANT INFORMA	TION <u>MUST BE COMPLETED (by parents)</u>
A 11 ' /D1 ' 1 1' 1 '1'.'		
Allergies/Physical disabilitie	s/Early Intervention	
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I agree to make payments fo Tuition for the 2019-2020 Se		w. Enclosed is my non-refundable \$175.00 Registration fee.
First Half Payment:	\$1338.00 Due:	: May 15, 2019*
Second Half Payment:	\$1337.00 Due:	: November 30, 2019*
(*There w	ill be a late charge of \$25.00	0 per term if not received on or before the designated date.)
Tuition Reimbursement Policy:	if a child is withdrawn after	r the first full tuition payment has been made, there will be:
Full Reimbursement - if the with		
		<u>une 30th.</u> (if on a payment plan, you owe balance of 50% of fall tuition) ubject to reimbursement and all tuition payments for the entire school
year will remain due and payab		
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<u>PLEASE</u> N	TAKE CHECKS PATA	BLE TO GARDEN MANOR NURSERY SCHOOL
Signature of Devent		Dete
Signature of Parent		Date
I give permission for my chi	ld to participate in the l	local field trips as arranged by the Garden Manor Nursery School.
Signature of Parent		Date
Are you a member of a local pa	arish or Church? Name of	f parishOR(none/unaffiliated)
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