

Thank you for considering
Little Blessings Nursery School

2018 / 2019

AGE REQUIREMENTS

Mommy and Me - Two and three year olds

Three Year Old Pre-K Class - Child must be three by October 31, 2018

Four Year Old Pre-K Class - Child must be four by October 31, 2018

Five Year Old Pre-K Class - Child must be five by December 31, 2018

The Mommy and Me Class

Meeting on Mondays, 9:00 Class and 10:30 Class

The Three Year Old Pre-K Class

Meeting on Tuesday and Thursday from 9 am-12:00 pm and 12:45-3:45 pm

The Four Year Old Pre-K Class

Meeting on M/W/F from 9 am-12:00 pm and 12:45-3:45 pm

The Five Year Old Pre-K Class

Meeting on Tuesday, Wednesday, Thursday and Friday from 9 am-1:00 pm (Lunch)

TUITION

Monday - Mommy and Me	-----	\$405.00
		or 9 monthly payments of \$45.00
Tuesday - Thursday - Three Year Olds	-----	\$1,395.00
		or 9 monthly payments of \$155.00
Monday - Wednesday - Friday - Four Year Olds	-----	\$1,710.00
		or 9 monthly payments of \$190.00
Tuesday, Wednesday, Thursday, Friday - Pre-K	-----	\$1,935.00
		or 9 monthly payments of \$215.00

REGISTRATION: Along with your completed application, please include a non-refundable check or money order made out to Little Blessings Nursery School for **\$50.00** per child. **Please note that upon receipt of registration your child is considered accepted into school unless we notify you otherwise.** Also, keep this page for your records.

TUITION: Divided into 9 equal payments with a due date beginning August 1st for September tuition, then September 1st for October tuition, etc. (Last payment April 1st)

DISCOUNT: Members of Reeder's Church receive a 10% discount. Pay in full by August 1st, - receive 10% discount. Additional siblings in school - receive 15% discount per additional child.

There is one discount per child.

MAIL: First tuition to: Little Blessings Nursery School, P.O. Box 187, Reeder's, PA 18352. After that, checks may be placed in the red box outside the office door. No need to put them in envelopes.

FEES: \$15 charge for checks received after the 15th of the month

BOUNCED CHECKS: We will charge current bank fee

NOTE: You will **NOT** receive a bill each month

PAYMENT: Check or money order only (NO COLORED INK PLEASE)

PLEASE CALL THE REGISTRAR, LISA PRICE AT 570-629-1712

Little Blessings Nursery School

Registration Form - Personal and Confidential

Please submit a non-refundable registration fee of \$50.00 - check or money order only.

PLEASE PRINT CLEARLY

Child's Name _____ Sex ____ Birth Date _____

Mailing Address _____ Town & Zip _____

Circle One Only: MOMMY + ME / THREES - AM or PM / FOURS - AM or PM / FIVES PRE-K

Father's Name _____ Mother's Name _____

Father's Cell Phone _____ Mother's Cell Phone _____

E-mail _____

Name and Ages Of Siblings _____

Church Affiliation _____

Father's Occupation _____ Mother's Occupation _____

Father's Work # _____ Mother's Work # _____

Has child previously attended Nursery School or Day Care? _____

If so, how long? _____ How did you hear about Little Blessings? _____

What are your child's favorite interests? _____

Please list child's other group experiences (Sunday School, Babysitter, Play Groups etc.)

Does your child like to play alone? _____ With playmates? _____

Does your child have any behavioral problems? Examples: Leaving a classroom or building on their own, hitting, biting etc. _____

Special Concerns: Fears _____ Food _____ Health _____

Would your child like to use a nickname in school? _____

What is your family structure? Traditional two parent _____

Divorced _____

Step Parent _____

Single Parent _____

Other _____

Is there any confidential information that would help the teacher work with your child? _____

Check and the teacher will contact you before school begins. _____

Please list dates for immunizations. (Check marks will not be accepted)

DPT _____ Rubella _____

Measles _____ Mumps _____

Tetanus Booster _____ Other _____

Family Physician _____

Known Allergies _____ Medical Problems _____

If your child is medically or religiously exempt from immunizations, please request a medical exempt form.