



**ENROLLMENT**  
**Application/Agreement**  
**2018-2019**

**25 E. Church St.**  
**Sellersville PA.**  
**215-257-7344**

Child's Full Name: \_\_\_\_\_ Child's Birthdate \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mom Cell : \_\_\_\_\_

Father's Name: \_\_\_\_\_ Dad Cell: \_\_\_\_\_

Mom Work Phone: \_\_\_\_\_ Dad Work Phone: \_\_\_\_\_ Email \_\_\_\_\_

**PRE-SCHOOL**

**FULL DAY PROGRAM**

**9:00 am – 4:00 pm**

- 5 FULL DAYS (9am-4pm)
- 3 FULL DAYS (Mon, Wed, Fri)
- 2 FULL DAYS (Tues, Thurs)

Extended Hours? 7:00am to 6:00pm  **YES**  **NO**

**PRE-SCHOOL**

**HALF DAY PROGRAM**

**9:00 am – 12 pm OR 1:00 pm – 4:00 pm**

- 5 HALF DAYS  AM  PM
- 3 HALF DAYS (M,W,F)  AM  PM
- 2 HALF DAYS (T, TH)  AM  PM

Extended Hours 7:00am-12noon OR 1pm-6pm  **YES**  **NO**

**KINDERGARTEN** 5 years by August 31st

- 5 FULL DAYS (9am-4pm)
- 5 HALF DAYS AM
- 5 HALF DAYS PM
- 5 HALF DAYS AM

Extended Hours? (see below)  **YES**  **NO**

7:00am to 6:00pm

**KINDERGARTEN ENRICHMENT**

9-12 1-4

- 5 HALF DAYS  AM  PM
- 3 HALF DAYS (M,W,F)  AM  PM
- 2 HALF DAYS (T, TH)  AM  PM

Extended Hours? (see below)  **YES**  **NO**

7:00am to 6:00pm

Transportation to Public School \_\_\_\_\_ What School \_\_\_\_\_

**Approximate time of child's arrival** \_\_\_\_\_ **time of departure** \_\_\_\_\_

It is hereby agreed that tuition in the amount of \$ \_\_\_\_\_ shall be paid by the 1st of each previous month for the school and childcare services schedule indicated above, pursuant to specifications given in the Tuition Schedule.

**Accepted by parent/guardian** \_\_\_\_\_ **Date** \_\_\_\_\_ **Director Initial** \_\_\_\_\_

**Enclosed is my \$55.00 non-refundable application fee.**