

**Plainview Nursery School**  
**Younger Sibling Response Sheet**

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

Class \_\_\_\_\_

Dear Parents:

Help us plan for our future enrollment. Kindly fill out the form below with the names and birthdates of siblings in your family.

As the sibling of a currently enrolled student or sibling of an alumni student, you will be given notification of special registrations dates before registration is open to the general public.

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Are there younger siblings at home? \_\_\_\_\_

If yes: Name \_\_\_\_\_ Age \_\_\_\_\_ Date of birth \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of birth \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of birth \_\_\_\_\_