

**2024-2025 APPLICATION FORM**

Name of Child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender:\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State/Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kindergarten Attending (if known):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Parent and/or Guardian Information*

Father's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/We prefer to register the above child for the year beginning September 2024 **(check one)**:

 \_\_\_\_\_\_Preschool (3-year-old class) - 2 days, Tues/Thurs 9am to 12pm ($200/month)

\_\_\_\_\_\_Pre-Kindergarten - 3 days, Mon/Weds/Fri 9am to 12pm ($250/month)

\_\_\_\_\_\_Junior-Kindergarten - 5 days, Mon/Tue/Wed/Thurs/Fri 9am to 12pm ($350/month)

Where did you first learn about CCNS' program?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 If you were referred to our school, by whom? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you previously had a child attend CCNS? No:\_\_\_\_\_\_\_ Yes:\_\_\_\_\_\_\_\_ When:\_\_\_\_\_\_\_\_\_\_\_

***Please return this form and a $50.00 non-refundable registration fee payable to CCNS to the address listed below. Alternatively, payment can be made via Paypal. Please contact Enrollment at*** ***enrollment@ccns-preschool.org*** ***to arrange for an invoice to be sent directly to you.***

**SIGNATURE(S):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:** \_\_\_\_\_\_\_\_\_\_

**Once approved, you will receive an email with a contract and other forms to be completed and returned.**

**Please return this form with the $50.00 non-refundable application fee payable to**

**Carlisle Community Nursery School at the address below:**

**Carlisle Community Nursery School**

**Attn: Vice President of Enrollment**

**1340 Forge Road**

**Carlisle, PA 17013**

**\*\*\*\*\*\*\*\*\*\*\*INTERNAL USE ONLY - DO NOT WRITE IN SPACES BELOW\*\*\*\*\*\*\*\*\*\*\*\***

Date received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application fee paid:\_\_\_\_\_\_\_\_\_\_\_\_\_

Check number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accepted/Wait-listed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher/Class Assignment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parents notified of status:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Withdrawal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_