

**BRADLEY HILLS PRESBYTERIAN CHURCH NURSERY
SCHOOL APPLICATION FOR THE YOUNG TWO'S
PROGRAM STARTING JANUARY 2025**

The Bradley Hills Presbyterian Church Nursery School is open to children of all races, faiths, ethnic backgrounds and nationalities. The following are some of the factors considered in accepting a child: Siblings of currently or previously enrolled students; Bradley Hills Presbyterian Church membership; repeat applicants; date application is received in the office. To maintain priority ranking, applications must be received in the school office no later than April 30, 2024. Tuition assistance is available. Please contact the office for more information

For Office Use Only	
Received _____	Check # _____
Accepted _____	Program _____
Deposit due _____	
Withdrawn _____	
Notes:	

*This two-day program is for children who turn two on or between September 2, 2024, and December 31, 2024.
Children attend 9:00-11:30 a.m. beginning January 6th on Mondays and Fridays.
Children do not need to be toilet trained*

Please Print Clearly – This form may also be completed by following this link: <https://tinyurl.com/ckrm97pn>

Name of Child: _____ Name you wish your child to be called: _____

Birth date: _____ Sex: ___M___F Primary Phone Number: _____
Month Day Year

Address: _____ ZIP code _____
Number Street City State

Parent/Guardian Name(s)	Relationship	Phone Numbers	
		Primary:	Secondary:
Email Address:			
		Primary:	Secondary:
Email Address:			

May Child's Name, Parent's Name(s), Home Address, Primary Phone Number, and Email Address(es) be included in the Preschool Directory (distributed to Preschool families only)? Yes _____ No _____

Others in Child's Home: Brothers: _____ Ages: _____
Sisters: _____ Ages: _____
Others (please specify) _____

Primary language spoken at home _____ Secondary language spoken (if any) _____
Does child speak English? Yes ___ No ___ Limited ___

Is your child currently enrolled in BHP CNS Cub Club? Yes ___ No ___

Where did you learn of our Nursery School? _____

Has your child ever received any developmental, educational, or behavioral evaluations? Yes ___ No ___

Please Complete Reverse Side

Has your child ever received, or is currently receiving any therapy or services? Yes ___ No ___

If you answered YES to any of the above please elaborate. You may also include other information of which the school should be aware to better serve your child needs, i.e. you are concerned about your child’s speech development. (Note: This information is confidential and will NOT influence acceptance decisions): _____

Does your child have any special dietary or allergy restrictions that we need to be aware of? If yes, please elaborate:

Previous school(s) attended _____ Permission to contact school(s)? Yes ___ No ___

Reason for leaving previous school _____

Have you ever had a child enrolled in our Nursery School? Yes ___ No ___ If yes, when & whom? _____

Have you ever applied before to our Nursery School? Yes ___ No ___ If yes, when & whom? _____

Have you visited our Nursery School? Yes ___ No ___ If no and you’d like to come for a tour, please call 301-365-2909 to arrange one.

Are you a member of BHPC? Yes ___ No ___ Does your child attend BHPC Church School? Yes ___ No ___

If No – Would you like more information about children & family programming at BHPC? Yes ___ No ___

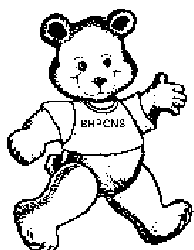
To ease the transition to school, students are on a modified schedule for the first week. The first day of school will be January 6, 2025. For the first two classes, children attend for one hour (either 9-10:00 a.m. or 10:15-11:15 a.m.). On the 3rd class, the children attend 9-11:30 a.m.

Terms of Admission

1. A non-refundable application fee of \$80.00 must accompany this application. Checks, cash, or online payments such as credit card or the Brightwheel platform accepted. Make checks payable to “BHPCNS.” Application will be considered only after the application fee has been collected.
2. Applications may be returned to the nursery school at any time, but no later than April 30, 2024 to maintain priority ranking.
3. This application is only for the school year indicated. Applicants accepted or placed on the waiting list must reapply for subsequent school years.
4. The nursery school is unable to accept specific teacher and/or classmate (including siblings) requests.
5. You will receive notification of acceptance status by letter via postal mail in late May 2024. Upon acceptance of enrollment a non-refundable Registration Deposit equal to one sixth of the yearly cost is due and is considered payment #1 toward the yearly fee. Payments 2 through 6 are due on the first of each month, January-May. The cost of the program is \$2,310, making the monthly tuition payments \$385.00.
6. Refund Policy: There are no refunds due to absences or unexpected school closures due to weather or other circumstances. If BHPCNS cancels a class due to low enrollment all fees will be refunded.

I/We hereby make application to register our child in Bradley Hills Presbyterian Church Nursery School and agree to comply with the above terms.

Parent/Legal Guardian’s Signature(s) _____ Date _____



Mail or Hand Deliver Applications to:
 Bradley Hills Presbyterian Church NURSERY SCHOOL
 6601 Bradley Blvd., Bethesda MD 20817
Or Email to: info@bhpcns.org

Questions?: Call 301-365-2909