

**BRADLEY HILLS PRESBYTERIAN CHURCH NURSERY  
SCHOOL APPLICATION FOR THE *Young Two's Program*  
STARTING JANUARY 2017**

The Bradley Hills Presbyterian Church Nursery School accepts all children without regard to race, color, religion, sex, or national origin. Tuition assistance is available. Please contact the office for more information. 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.

<b>For Office Use Only</b>	
Received _____	Check # _____
Accepted _____	Program _____
Deposit due _____	
Withdrawn _____	
Notes:	

***This two-day (Tuesday/Thursday or Monday/Wednesday) program is for children who turn two on or between September 1, 2016 and December 31, 2016. Children attend 9:00-11:30 a.m.***

*Children do not need to be toilet trained*

**Please Print Clearly**

Class desired (Indicate a first *and* second choice.): \_\_\_2 days, Mon. & Wed. or \_\_\_2 days, Tues. & Thurs.

*Please note: The nursery school is unable to accept specific teacher and/or classmate (including siblings) requests.*

**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		
		Place of Employment:	C:	H:
Email Address:		_____		
		W:		
		Place of Employment:	C:	H:
Email Address:		_____		
		W:		

\*\*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 \_\_\_\_\_

**Applicant lives with (check any that apply):**

Father \_\_\_\_\_ Mother \_\_\_\_\_ Stepfather \_\_\_\_\_ Stepmother \_\_\_\_\_ Other \_\_\_\_\_ (relationship)

**Others in Child's Home:** Brothers: \_\_\_\_\_ Ages: \_\_\_\_\_

Sisters: \_\_\_\_\_ Ages: \_\_\_\_\_

Other Adults: \_\_\_\_\_ Ages: \_\_\_\_\_

**Check any that apply:** Father deceased \_\_\_\_\_ Mother deceased \_\_\_\_\_

Parents divorced \_\_\_\_\_ Parents separated \_\_\_\_\_

**Primary language spoken at home** \_\_\_\_\_ **Secondary language spoken (if any)** \_\_\_\_\_

*Does child speak English? Yes \_\_\_\_\_ No \_\_\_\_\_ Limited \_\_\_\_\_*

Has your child ever received any developmental, educational, or behavioral evaluations? **Yes** **No**  
 Does your child have an IEP or IFSP (Individualized Education / Individual Family Service Plan)? **Yes** **No**  
 Has your child ever received, or is currently receiving any extra therapies or services? **Yes** **No**

Please let us know any pertinent medical, psychological, or emotional issues regarding your child so that we may better serve his/her needs (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: \_\_\_\_\_

Religious affiliation: \_\_\_\_\_ Place of Worship: \_\_\_\_\_

Please note: The Nursery School is open to children of all faiths, races, ethnic backgrounds and nationalities.

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? \_\_\_\_\_

Are you a member of Bradley Hills Presbyterian Church? **Yes** **No** Does your child attend BHPC Church School? **Yes** **No**

Have you ever applied before to our Nursery School? **Yes** **No** If yes, when & whom? \_\_\_\_\_

Have you visited our Nursery School? **Yes** **No**

Where did you learn of our Nursery School? \_\_\_\_\_

**Terms of Admission**

1. A non-refundable application fee of \$65.00 must accompany this application. Checks or cash accepted. Make checks payable to "BHPCNS."
2. Applications may be returned to the nursery school at any time.
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. Tuition is determined yearly and is divided into six equal payments. The cost of the program is \$1650.00, making the monthly tuition payments \$275.00.
6. Once accepted, a non-refundable registration fee 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.

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 Bring Applications to:**  
 BRADLEY HILLS PRESBYTERIAN  
 CHURCH NURSERY SCHOOL  
 6601 BRADLEY BOULEVARD  
 BETHESDA, MD 20817