

**ST. PAUL'S EPISCOPAL NURSERY SCHOOL
ENROLLMENT FORM – 2010/2011 SCHOOL YEAR
(This Form for New Students Only)**

PRIORITY (refer to Enrollment Policy) _____ DATE _____
 CHILD'S NAME _____ BIRTH DATE _____
 ADDRESS _____ ZIP CODE _____
 HOME PHONE _____ GENDER M _____ F _____
 MOTHER'S NAME _____ CELL PHONE _____
 FATHER'S NAME _____ CELL PHONE _____
 FAMILY E-MAIL ADDRESS _____

CHILD'S AGE AS OF SEPTEMBER 1, 2010: _____ YEARS AND _____ MONTHS OLD

This Enrollment Form must be accompanied by a non-refundable registration fee of \$60 for the first child and \$40 for each additional child. Checks should be made payable to St. Paul's Episcopal Nursery School. The registration fee will be refunded if the child is not placed in the school.

Enrollment Forms should be mailed to the following address and should be postmarked **no earlier than Monday, January 25th** (priority given to Enrollment Forms postmarked January 25th or later in the order received):
 St. Paul's Episcopal Nursery School
 1066 Washington Road
 Pittsburgh, PA 15228

Please mark your preference for the 2009-2010 year. Please indicate your **maximum possible choices in numerical order**. Final placement is at the discretion of the Director:

Morning Classes:

T/Th Lunch N More

Monday a.m. Parent/Toddler _____
 Friday a.m. Parent/Toddler _____
 Tuesday/Thursday a.m. 2-1/2 Year Old Class _____
 Tuesday/Thursday a.m. 3 Year Old Class _____
 Monday/Wednesday/Friday a.m. 3 Year Old Class _____
 Monday/Wednesday/Friday a.m. 4 Year Old Class _____
 Four Day a.m. 4 and 5 Year Old Class _____

Afternoon Classes:

Monday p.m. Parent/Toddler _____
 Tuesday/Thursday p.m. 2-1/2 Year Old Class _____
 Tuesday/Thursday p.m. 3 Year Old Class _____
 Tuesday/Thursday p.m. 4 Year Old Class _____
 Monday/Wednesday/Friday p.m. 3 Year Old Class _____
 Monday/Wednesday/Friday p.m. 4 Year Old Class _____
 Monday/Wednesday/Friday p.m. 4-1/2 to 5 Year Old Class _____
 Four Day p.m. 4 and 5 Year Old Class _____

If you have any questions, please contact Jane Adams at (412) 531-2644.

Office Use Only: Registration fee received _____ Class Assignment _____