**WEEKDAY NURSERY SCHOOL**

Morrisville Presbyterian Church

# P.O. Box 955, Morrisville, PA 19067-0955

weekdaynursery.org

Dear Parents,

Thank you for your interest in our school. Enclosed is an application for you to complete in order for your child’s name to be placed on the class list for the 2020-21 school year. ***Please return this application, plus the registration fee and tuition deposit, to the Enrollment Secretary at the address listed above***. If you wish to put your child’s name on our waiting list, please return only the application at this time.

We hope this letter will answer a few questions you may have concerning the school. The Weekday Nursery School is licensed by the State of Pennsylvania. Each class has a certified teacher. We are non-sectarian with a Christian atmosphere, interested in the complete development of the child----socially, intellectually, emotionally and physically.

A tuition and fee schedule is also enclosed. Tuition is paid in quarterly payments: September, November, January, and March. The school year is from mid-September to the end of May, and class times are from 9:15 am to 11:45 am, from 12:45 pm to 3:15 pm, or 9:15 am – 2:30 pm.

The school offers the following classes

## **4 year old classes*:*** *3 days per week: AM ONLY (M–W)*

4 days per week: AM ONLY(M – Th)

5 days per week: AM ONLY (M– F)

\*\*new class\*\*5 days per week FULL (M AM, T,W,TH FULL DAY and F AM)

\*\*new class\*\*3 days per week : FULL (T, W, Th)

## **3 year old classes*:*** *2 days per week: AM (Thurs. – Fri.)* **OR** *PM (Wed. – Thurs.)*

## *3 days per week: AM (Wed. – Fri.)* **OR** *PM (Tues. – Thurs.)*

## **Half-Pint class (2 yrs and 7 mos old by 9/30/20)*:*** *Mon and Tues* **O**R *Only Tuesday, AM*

Parents must make arrangements for their child’s transportation. A class list is provided to help form carpools.

A registration fee of $50.00, and a $100.00 tuition deposit are due with the return of the application. The deposit is applied toward the annual tuition and secures your child’s place for the coming school year. Make all checks payable to Weekday Nursery School. **These fees ($150.00) are NON-REFUNDABLE**. Please return the completed application to the Enrollment Secretary.

If you have any further questions, please contact me at weekdayabc123@gmail.com or 215-356-3525.

Sincerely,

Joanie Layden

Enrollment Secretary

Weekday Nursery School

Tuition and Fee Schedule

2020-2021 School Year

Quarterly Payment

Class Tuition (\*\*after $100 tuition deposit is paid)

*Engineers - 5 year olds attending*

5 ½ days per week $3484/yr $846/quarter

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*Inventors - 4 year olds attending:*

5 ½ days per week $3484/year $846/quarter

4 ½ days per week $2821/year $678/quarter

3 ½ days per week $2304year $551/quarter

3 full days per week $4607/year $1127/quarter

3 full and 2 ½ days per week $5963/year $1466/quarter

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*Little Explorers - 3 year olds attending:*

3 ½ days per week $2466/year $592/quarter

2 ½ days per week $1692/year $398/quarter

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*Half-Pints (2 years and 7 months old) attending:*

1 ½ day per week $1067/year $239/quarter

2 ½ days per week $ 2090/year $498/quarter

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Tuition is paid in 4 quarterly payments: September 15, November 15,

January 15, and March 15

***Other fees:***

- $50.00 **non-refundable** registration fee

- \*\*$100.00 **non-refundable** deposit, applied toward annual tuition, due June 1 (or with the application for summer enrollments). Acceptance of this deposit confirms your child’s place on the class roster.

**WEEKDAY NURSERY SCHOOL**

**Morrisville Presbyterian Church**

***mpcweekdaynurseryschool.com PO BOX 955 Morrisville, PA 19067***

STUDENT APPLICATION (please complete both sides)

Class (please check one)

*4 year olds*: 3 days AM\_\_\_\_ 4 days AM\_\_\_\_ 5 days AM\_\_\_\_

3 full days\_\_\_\_\_\_

3 full AND 2 ½ days\_\_\_\_\_\_

*3 year olds*: 2 days AM\_\_\_\_ PM\_\_\_\_

3 days AM\_\_\_\_ PM\_\_\_\_

*Half-Pints*: Monday AND Tuesday AM \_\_\_

ONLY Tuesday AM \_\_\_\_

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nickname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip Code\_\_\_\_\_\_\_\_\_\_

Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous school experience\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME BACKGROUND

Parent/Guardian’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation/Former Occupation/Special Training\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation/Former Occupation/Special Training\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do both parents now live with this child? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is either parent a member of the Morrisville Presbyterian Church? \_\_\_\_\_\_\_\_\_\_\_\_

Does this child have any allergies/foods that disagree with him/her?

(please list)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of an emergency when we cannot reach you, whom shall we contact?

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Other members of household

## Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_Relation to Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is Child adopted? \_\_\_\_\_\_\_\_\_\_\_\_\_\_If yes, at what age? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How does child get along with playmates?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does he/she dress themselves?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is he/she toilet trained?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CHILD MUST BE TOILET TRAINED BY THE START OF SCHOOL (EXCEPTION IS HALF-PINT CLASS ONLY)

How was Weekday Nursery School brought to your attention?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please add any other information, which may help the teacher to better understand your child below.

***IMPORTANT:***

**Photo Release**- I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(parent/guardian signature),

**Give - Do Not Give(circle one)** permission to Weekday Nursery School to release for publicity my child’s photograph taken in a school-sponsored activity. Names will not be used.

**Medical Release**-In the event of an emergency, it may become necessary for us to transport (via ambulance) a child to the nearest hospital for treatment while participating in any school sponsored program or activity. The doctors in the emergency room cannot examine or give treatment to a child without general information about the child and the written approval of the parent/guardian. We ask that you complete and sign below giving us the authority to have your child taken care of at the nearest hospital in the event of an emergency situation when and **only when you cannot be contacted**.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(parent/guardian signature),

**Give - Do Not Give** **(circle one)** Weekday Nursery School the authority to have my child treated in a hospital emergency room in the event I cannot be reached.

Date above releases signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ANY QUESTIONS? CALL 215-356-3525

OR VISIT OUR WEBSITE AT weekdaynursery.org