

APPLICATION FOR ADMISSION

Today's Date: _____

Child's Name: _____

Date of Birth: _____ Age: _____ Sex : M F

Parent/Guardian(s) Name(s): _____

Address: _____

Telephone:

Home: _____ Cell: _____

Email: _____

Membership status (please circle) :

Current member

Past member

New member

How did you hear about the Children's Nursery School ("CNS")?

Briefly describe your family including hobbies, interests and talents you would enjoy contributing to the nursery school.

Does your child have any allergies? Please list.

Child's Name: _____

What previous group experience has your child had?

What do you hope your child will gain from preschool?

Is your child potty trained? (circle one) YES NO IN PROGRESS

Please note any physical or medical information of which the teacher should be aware.

Are there any physical limitations or other issues that may affect a parent/guardian's role as helper in the classroom?

Please mail this application and \$40 (\$25 for returning families) to:
Children's Nursery School, P.O. Box 8086, Portland, Maine 04104

The Children's Nursery School admits students of any race, color, creed, gender, national or ethnic origin, social class or family structure.

For more information about CNS please visit our website www.childreznurseryschool.com, contact us by mail or send us an email at childreznurseryschool@gmail.com.