

Harundale Presbyterian Weekday Nursery School
1020 Eastway, Glen Burnie, MD 21060
410-766-4338

SCHOOL YEAR 2024-25 APPLICATION FOR ADMISSION
Registration fee \$75/\$65 if registered before 6/1/24

Application for: ___ 3 year old class --must be three by 9/01/2024 tuition \$170/month Tues. /Thurs.
 ___ 3 year old class tuition \$225/month Mon./Wed./Fri.
 ___ 4 year old class --must be four by 9/01/2024 tuition \$225/month Mon./Wed./Fri.
 ___ 4 year old class tuition \$280/month - Mon.-Fri.

Child's Full Name: _____
Name child goes by: _____
Date of Birth: _____ **Male or Female**
Child's Home Address: _____
City: _____ **Zip:** _____ **Home Phone Number** _____

Parent or Guardian Information:
Father's Name: _____ **Phone** _____
Father's Address: _____
Father's Occupation: _____
Father's Place of Employment: _____ **Phone** _____
Email address: _____
Mother's Name: _____ **Phone** _____
Mother's Address: _____
Mother's Occupation: _____
Mother's Place of Employment: _____ **Phone** _____
Email address: _____

Family Information:
Brothers and/or sisters (Please list names, ages, and whether they live with the child):

Please list any other people living with the child and their relationship to the child: _____

Pick Up:
Persons authorized to pick up the child: _____

Persons who may not pick up the child: _____

**List name, address and phone number of persons to be contacted in case of emergency:
(Please do not list anyone who lives out of town or is working.)**

1. _____

2. _____

Personal History:

Has the child had previous group or preschool experience? If so, when and where?

Does your child have any allergies? _____

Are there any medical problems what we should be aware of? _____

Childs Physician _____ **Phone number** _____

Languages spoken in home _____

Any additional information about the child _____

I am submitting payment of the registration fee as required by the school. I understand the registration fee is not refundable. I also understand that the tuition is due the first day of the month from September-May to HPWS. Charges will be made for returned checks.

Signed: _____ **Date:** _____

Registration is open to all regardless of race, color, religion, national or ethnic origin.

Please tell us how you heard about our preschool _____
