



## Mommy & Me

(2-3 years)

2010-2011

Name of Child \_\_\_\_\_ Male/Female \_\_\_\_\_ Birth date \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Child resides with \_\_\_\_\_ Email \_\_\_\_\_

Name of Father/Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of Mother/Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Church membership of Mother/Guardian: \_\_\_\_\_

Church membership of Father/Guardian: \_\_\_\_\_

Child's Sunday school: \_\_\_\_\_

Number of other children in the family (give name, age, and sex of each child)

\_\_\_\_\_

Other adults living in the household (grandparent, aunt or uncle, etc.): \_\_\_\_\_

I would like my child enrolled in Weekday Nursery School because

\_\_\_\_\_

(All children must be accompanied by an adult. All children must be 2 prior to first class. Class limit is 6 children/w parents. Class time is 9:30-10:45am. If warranted an additional class will be added. Cost is \$25/per 4 week session or \$100 for all 16 weeks)

Class sessions on Tuesday

- Session 1-Sept. 28th, October 5<sup>th</sup>, 12<sup>th</sup> & 19<sup>th</sup> (Fall theme)
- Session 2- Nov. 2nd, 9th, 16th, & 23rd- (Thanksgiving theme)
- Session 3-Dec.14<sup>th</sup>, January 4<sup>th</sup>, 11<sup>th</sup>, 18<sup>th</sup> and 25<sup>th</sup>. (Winter theme) (Bonus Christmas Party/Dec)
- Session 4- March 8th, 15th, 22nd and 29th (Spring theme)

(If additional class is warranted this class will be held on Weds.)

(All sessions taught by degreed/certified instructor)

Please check classes attending:

1st Session: \_\_\_\_\_

2<sup>nd</sup> Session: \_\_\_\_\_

3<sup>rd</sup> Session: \_\_\_\_\_

4<sup>th</sup> Session: \_\_\_\_\_

Snack will be provided at each class.  
Please list any food allergies your child may have:

\_\_\_\_\_

**Sample Program: (Subject to Change)**

- Opening Free Play
- Circle Time
- Craft Corner
- Snack
- Closing Circle

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please return all applications to: Weekday Nursery School, 10 Wildwood Ave, Pitman, NJ 08071.