

REGISTRATION FORM 2023-2024

Child's Name		Nickname		Sex
Mother's Name	Father's Name			
Street	City		Zip	_ Phone
Date of Birth	Ch	nild's Age as	s of August 31, 2023	
Email Address				
Did child attend schoo	l last year?	Wher	e?	
PROGRAM/TUITION	FEES/RECOMMENDED AC	GES: Pleas	se indicate 1st, 2nd, &	3rd choices:
# Days	Dismissal Time	Tuition Fee	Recommended Ages	Enrollment Preference (1st, 2nd,3rd)
2-DAY (T/TH) 9 AM until	11:45 AM	\$3,600	2.9 - 5 YEARS OLD	
	1:00 PM	\$4,465	3 YEARS AND OLDER	
	2:00 PM	\$5,040	3 YEARS AND OLDER	
3-DAY (M/W/F) 9 AM until	11:45 AM	\$4,910	3.6 - 5 YEARS OLD	
	1:00 PM	\$5,610	4 YEARS AND OLDER	
	2:00 PM	\$6,425	4 YEARS AND OLDER	
5-DAY (M-F) 9 AM until	11:45 AM	\$8,030		
	1:00 PM	\$9,400		
	2:00 PM	\$10,840		
3-DAY (T/W/Th)	Tues 9-11:45 AM Wed 12:00-2:45 PM Thurs 9-11:45 PM	\$4,500		
OCTOBER. 2-Day stud	HOSE CHOOSING THE 11:45 dents can stay until 2 PM for oilled to parents in the middle	\$23 per da	y and 3-Day students car	DAY OPTION STARTING IN n stay until 1 PM for \$15 per
	Off : An optional early morn 0 A.M. for an additional \$12			
	sit is due March 1, 2023. gistrar must receive writt			vill result in forfeit of those hdraw your child.
I wish to register my of for the 2023-2024 sch non-refundable registr		pove and ag	, in the Communit gree to pay the tuition as	ty Nursery School of Wayland stated. Enclosed is my \$150
Signature:	Date:			
Initial here: WITHOUT THE SIGNA	to acknowledge the non-re FURE AND INITIALS)	efundable r	egistration fee. (FORM W	/ILL NOT BE PROCESSED

Please mail the form and a check (payable to Community Nursery School of Wayland) for \$150 to our Registrar, Sarah Fair, 23 Barnesdale Road, Natick, MA 01760. You may also drop off the form at CNS.