

THE BEECHWOOD SCHOOL

PRESCHOOL & KINDERGARTEN

SUMMER 2017 REGISTRATION FORM

Name of Child _____ Sex: M/F Date of Birth _____
Street _____ Home Telephone _____
City, State, Zip Code _____ E-mail Address _____
Parents (Mother) _____ Work# _____ Cell # _____
or Guardian (Father) _____ Work# _____ Cell# _____

Has your child previously attended preschool? _____ Where _____
Recommended by _____

Summer Session – June 26, 2017 through August 17, 2017

NOTE : *Beechwood will be closed Monday, 7/3/17 and Tuesday, 7/4/17 in observance of Independence Day.
During our summer session there are no Friday hours offered.

Please mark the exact weeks you plan to attend. (There is a **minimum of 6 weeks** registration.)

Wk. of 6/26 ___ Wk. of 7/03* ___ Wk. of 7/10 ___ Wk. of 7/17 ___
Wk. of 7/24 ___ Wk. of 7/31 ___ Wk. of 8/07 ___ Wk. of 8/14 ___

____ Half Day (9:00am - 11:30am)
____ Half Day & Lunch (9:00am - 1:00pm)
____ Full Day (M, T, W & R*) (7:30am - 5:30pm) approx. arrival ___ am; approx. departure ___ pm
____ Other (indicate arrival & departure time to the right of desired days.)

Number of days enrolled: Two ___ Three ___ Four ___
Days Preferred: Monday ___ Tuesday ___ Wednesday ___ Thursday ___
Vacation Schedule: _____

(All vacations and withdrawals are to be finalized by March 1, 2017 to receive credit or a tuition deposit.)

Comments: _____

I authorize BEECHWOOD SCHOOL to use photographs of my child on their public website without the use of my child's name. Yes ___ No ___
I authorize THE BEECHWOOD SCHOOL to use photographs in which my child appears for educational or promotional purposes. Yes ___ No ___
I authorize my child to go on local walks as part of the school program. Yes ___ No ___
I authorize my child to be taken to a hospital in an ambulance in case of an emergency. Yes ___ No ___

A \$150 non-refundable registration fee and a \$225 tuition deposit are required to secure your child's placement.

Please return this registration application by _____

Signature _____ Date _____