



St. Andrew's Nursery School & Kindergarten
REGISTRATION CARD

No. _____

Class _____

Student's Name _____ Birth Date: _____

Parents' Names _____ Child's Gender: M _____ F _____

Address _____ Town _____ Zip _____

Phone #1 _____ Phone #2 _____ Phone #3 _____

Email Address _____

Registration Fee: \$50 Enclosed _____ (Non-Refundable) Discount: Active Church Member _____ Sibling _____

5 years old: 5 days (a.m.) _____ Transitional Kindergarten

4 years old: 4 days (a.m. or p.m.) 1st choice _____ 2nd choice _____ Science & Math Academy (5th day, Fri) _____

3 years old: 3 days (a.m. or p.m.) 1st choice _____ 2nd choice _____ Literacy Lab - Thurs, p.m. (4th day, Thurs) _____

3 years old: 2 days (a.m. or p.m.) 1st choice _____ 2nd choice _____ Literacy Lab - Wed, p.m. (3rd day, Wed) _____

2½ years old: 2 days Mon/Tues (p.m.) _____ Thurs/Fri (a.m.) _____

Mother's Morning Out: 2 years old (a.m.) Tues _____ Wed _____ Thurs _____

Parent Toddler: 18-35 months 1 day (a.m.) Mon _____ Fri _____