



VILLAGE NURSERY SCHOOL  
REGISTRATION FORM

Child's Name: \_\_\_\_\_

Name to be called at school: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address:

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Class Preference:

Pre 3's \_\_\_\_\_ 3's \_\_\_\_\_ 4's \_\_\_\_\_ 5's \_\_\_\_\_

1 month's Class Deposit \$ \_\_\_\_\_

Registration Fee \$50.00

Total Due: \_\_\_\_\_