



Bethpage Nursery School

A Parent Cooperative
22 Lexington Avenue, Bethpage, NY 11714 (516) 931-0811

For Office Use Only	
Amount Paid at Registration:	
_____	Registration Fee
_____	Maintenance/ Fundraising
_____	June Tuition
_____	Tuition (other than June)
_____	Total Amount Paid

REGISTRATION FORM

(Please Print)

STUDENT INFORMATION

Student's last name: _____ First: _____ Middle: _____ Birthdate: _____ Sex: M F
 _____ / _____ / _____

Street address: _____ City: _____ ZIP Code: _____

Home Phone: _____ Email: _____

FAMILY INFORMATION

Father's Name: _____ Mother's Name: _____

Occupation: _____ Occupation: _____

Home Phone () _____ Home Phone () _____

Work Phone () _____ Work Phone () _____

Cell Phone () _____ Cell Phone () _____

Sibling Name: _____ Birth Date: / / _____

Sibling Name: _____ Birth Date: / / _____

Sibling Name: _____ Birth Date: / / _____

CLASS/PARTICIPATION INFORMATION

Class Preference (must select one):

TWO YEAR OLD PROGRAMS: Two of Us _____ Toddler Separation _____

THREE YEAR OLD PROGRAMS: 3's (M/W) _____ 3s (M/W/F) _____ 3s (T/TH) _____ 3s (T/TH/F) _____

FOUR YEAR OLD PROGRAMS: Pre-K AM _____ Pre-K AM with K-Readiness _____ Pre-K PM/K-Readiness Combo _____

Participation (must select one):

Full _____ Half _____ Non-Participation _____

REGISTRATION, MAINTENANCE/FUNDRAISING, AND JUNE TUITION FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Signature: _____ Date: _____

-- Please see reverse --



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SOCIAL / DEVELOPMENTAL INFORMATION

Has your child been in the care of adults other than his/her parents: Yes No

If yes, please explain: _____

Has your child had previous school or group experiences? Yes No

If yes, please explain _____

Does your child play with other children on a regular basis? Yes No

If yes, what age range and under whose supervision? _____

What types of activities does your child enjoy the most? (Check all that apply)

Arts & Crafts Building Pretend Play Climbing

Other (please explain) _____

Do you have any concerns about your child's development (physical, social, emotional or intellectual) Yes No

If yes, please explain _____

Has your child ever been evaluated for developmental delays? Yes No

Has your child received early intervention/CPSE services? Yes No

If yes, please explain: _____

Does your child continue to receive these services? Yes No

How did you hear about Bethpage Nursery School? _____

The above information is true to the best of my knowledge

Signature: _____

Date: _____