

# **PARENT-INFANT-TODDLER**

## *Enrollment Form Spring 2025*

This form must be accompanied with the \$150, non-refundable fee.  
Cash or check only - Checks made out to "Village Nursery School"

If you have any questions, contact Julia Deery, director, at:  
765-743-4039 (phone) [jdeery@fumcwl.org](mailto:jdeery@fumcwl.org) (email).

### **ENROLLMENT IS BASED ON YOUR CHILD'S AGE AS OF September 1, 2024**

**TUESDAY:        Ages 12-24+ months**

**WEDNESDAY:    Ages 12-24+ months**

\*if your child turns 1 after September 1, talk to Julia

### **PLEASE PRINT NEATLY**

CLASS DAY REQUESTED 1<sup>ST</sup> CHOICE \_\_\_\_\_ 2<sup>ND</sup> CHOICE \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

CHILD'S BIRTHDATE \_\_\_\_\_ **KNOWN ALLERGIES/MEDICAL CONCERNS:** \_\_\_\_\_

\_\_\_\_\_

PARENT NAME \_\_\_\_\_ PARENT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

If you are a current student, is this a new address for your family? Y / N

EMAIL ADDRESS \_\_\_\_\_

### **HOW DID YOU HEAR ABOUT US?**

\_\_\_\_ FACEBOOK    \_\_\_\_ ADVERTISEMENT

\_\_\_\_ REFERRAL    \_\_\_\_ WEBSITE

\_\_\_\_ OTHER HOW? \_\_\_\_\_

OFFICE USE	
Check # _____	Date of Check _____
Amount _____	Confirmation sent _____