



## **MAYFAIR NURSERY SCHOOL REGISTRATION INSTRUCTIONS 2026-2027**

A most Recent Copy of your child's Immunization Record MUST be turned into the teacher before the first day of school, September 2026.

Date: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Nickname: \_\_\_\_\_

Street: \_\_\_\_\_

Town: \_\_\_\_\_ Zip: \_\_\_\_\_ Birthdate: \_\_\_\_\_

E-Mail(s): \_\_\_\_\_

School District: \_\_\_\_\_

Name of Mother or Legal Guardian (circle one):

\_\_\_\_\_ CellPhone: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Name of Father or Legal Guardian (circle one):

\_\_\_\_\_ CellPhone: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

If Applicable, Name of Caregiver: \_\_\_\_\_ Phone: \_\_\_\_\_

Parents are (circle one):      married/partner      separated      divorced      single      widow

Child lives with (circle one): parents      mother      father      other (please list) \_\_\_\_\_

Names and Ages of siblings: \_\_\_\_\_

In the event that your child becomes sick and neither parent can be reached, list two contact people who may be called.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergies: \_\_\_\_\_

Special needs or parental concerns that the teacher should be aware of \_\_\_\_\_

Is your child receiving services? (i.e., speech, physical therapy, occupational therapy?) \_\_\_\_\_

Left-handed \_\_\_\_\_ Right-handed \_\_\_\_\_ Potty-Trained: Yes / No (circle one)

Does your child have any fears that should be noted: \_\_\_\_\_

List interest(s): \_\_\_\_\_ Favorite color(s): \_\_\_\_\_

Family Pet(s): \_\_\_\_\_

Has your child previously attended a Preschool program? No \_\_\_\_\_ Yes \_\_\_\_\_

What do you want your child to gain from their nursery school experience? \_\_\_\_\_

Any talents or interests a family member could share with the class? \_\_\_\_\_

**Release of Child:** My child \_\_\_\_\_, may be released to the following people: \_\_\_\_\_

**Method of Payment:** Please make checks payable to **Mayfair Nursery School** and mail with completed forms to:

**Mayfair Nursery School**

**51 Glenridge Rd.**

**Glenville, NY 12302**

All other tuition/correspondence should be mailed to the school at the address above or given to the teacher at school.

Select your class(es) below.

- |  |  |
|--|--|
| <input type="checkbox"/> <b>3 AM class (T/TH 9:00-11:30 am)</b>  | <b><u>\$200.00 total payment includes:</u></b> |
| <input type="checkbox"/> <b>3 PM class (T/TH 12:00-2:30 pm)</b>  |  |
| Registration Fee (one time, non-refundable)*                     | \$90.00  |
| Maintenance Fee (one time)                                       | \$110.00                                       |
| <br>   |  |
| <input type="checkbox"/> <b>4-5 AM class (MWF 9:00-11:30 am)</b> | <b><u>\$200.00 total payment includes:</u></b> |
| <input type="checkbox"/> <b>4-5 PM class (MWF 12:00-2:30 pm)</b> |  |
| Registration Fee (one time, non-refundable)*                     | \$90.00  |
| Maintenance Fee (one time)                                       | \$110.00                                       |

**The \$90 registration fee is non-refundable. It is understood the tuition of \$200.00 (two-day) or \$220.00 (three-day) shall be due on the first business day of each month by check, payable to Mayfair Nursery School or in cash in a labeled envelope. Tuition is late after the 3rd business day of the month and a \$10 late fee will be applied.** I understand there will be no refunds or partial refunds due to illness, snow days or holidays. Extenuating circumstances will be referred to the Advisory Board.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

How did you hear about us?

\_\_\_\_ Relative/Friend \_\_\_\_\_ Website \_\_\_\_\_ Sign / Drive By \_\_\_\_\_ Facebook \_\_\_\_\_ Other

*\* To withdraw prior to the start of the school year, Mayfair Nursery School must receive written notice by July 1st or the maintenance fee will be forfeited.*

*\*Students currently enrolled in the 3 year old morning class will advance to the 4 year old morning class for the next school year. The same progression applies to students in the afternoon classes. Placement exceptions may be considered based on availability. Please contact Ms.Chris for further information.*

**\*\*The full year's tuition may be paid in advance.**

**\*Note:** In typical situations, it is expected that children be toilet trained. Special circumstances should be discussed with the teacher.