NICHOLSON SCHOOL APPLICATION FOR ENROLLMENT

Child Information:					
Child's Name (Last, F	irst, Middle):				
Preferred Name/ Nickname: D		Date of Birth:		Phone:	
Please Circle:	Male	Female			
Current Address:					ZIP Code:
Family Information	:			L	
Parent #1/ Guardian N	Name #1:				
Email:					
Cell Phone:			Work Phone:		
Employer:					
Employer Address:					
Parent #2/ Guardian N	Name #2:				
Email:					
Cell Phone:			Work Phone:		
Employer:					
Employer Address:					
An application fee of \$75.00 Please submit applications to				-	o, IL 60622
arent / Guardian Signature	& Date				
ass Choices					
ease write 1st Choice and 2r	d Choice in the bo	x			
Preschool Option 1	Prescho	ool Option 2	Preschool O	ption 3	Come Play with Me!
Day	3 Day		5 Day		Toddler/Caregiver Program
ursday - Friday 30am - 11:00am	Monday - W 8:30am - 11	•	Monday - Friday 8:15am - 12:15pm		Thursdays (Fall, Spring) 11:15am – 12:15pm

- Enrollment Schedule

 > A deposit of 25% for preschool is due with a signed contract and is non-refundable and non-transferable.

 > Tuition Balance for 2 Day Program: due June 1st.

 > Tuition Balance for 3 Day / 5 Day Programs: due June 1st and October 1st in two equal installments.