



Hilltop Nursery School

148 Haverhill Street, North Reading, MA 01864

(978) 664-4532

office@hilltopnr.org

Registration/Application Form – \$75 Registration Fee

New Enrollment

Please download and print this application form and mail it along with the \$75 fee to Hilltop at the address listed above. **Due to Covid-19 and restrictions of visitors, please do not drop off registration forms in person at Hilltop.** To drop-off in person, please use the mail slot to the right of the front door of the Union Congregational Church Office. The office is located at the front of Church and accessed from the lower lot off of Haverhill Street. An email will be sent once your application and fee have been received. Applications will be accepted until Friday, February 4th. A lottery will be used beginning on Monday, February 7th to fill open spaces. Children are placed in age-appropriate classes. Please understand that because a program is listed does not guarantee that it will run in the 2022 – 2023 school year. You will receive a confirmation email by Friday, February 18th that will inform you of your child’s status for the 2022 – 2023 school year.

Please indicate your 1st, 2nd and 3rd choice

Choice 1 st , 2 nd , 3 rd	Preschool (2.9 up to Pre-k year) Indicate 1 st and 2 nd choice
	4 day – Tuesday – Friday
	2 day – Tuesday & Wednesday
	2 day – Thursday & Friday

Choice 1 st , 2 nd , 3 rd	Pre-K (Year before Kindergarten) Indicate 1 st and 2 nd choice
	4 day – Tuesday - Friday
	2 day – Tuesday & Wednesday*
	2 day - Thursday & Friday*
	*Must be discussed with Director

Please print clearly

Child’s Name _____ Birthdate: ___/___/___ Gender: _____

Street Address _____ Town/City _____ Zip _____

Age when admitted in September _____ years _____ months

Phone #: _____ E-mail _____

Father’s Name: _____ Mother’s Name: _____

Does your child have an allergy or chronic health condition we should be aware of? _____ Yes _____ No
If yes, please indicate the condition. _____

****I understand the \$75 registration/application fee is non-refundable. Payments should be made payable to Hilltop Nursery School. Please sign and date below.**

Date: _____

Parent/Guardian Signature _____

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For school use only:

Date Rec’d _____ Reg. Fee **\$75.00** Check # _____

