

## Application for Registration - 2026/2027 School Year

**Complete all 3 sections** of the application and mail it with the \$100 non-refundable registration fee to:

**Meghan Gianforti**  
**426 Ashbourne Road**  
**Rochester, NY 14618**

\*Please make checks payable to **Twelve Corners Nursery School**.

### **SECTION 1: FAMILY INFORMATION**

CHILD'S INFORMATION		
Name	Birth Date (mm/dd/yy)	Gender
Address		

PARENTS' INFORMATION			
Name	Relationship to Child	Day Time Phone	Email Address
		<input type="checkbox"/> Mobile <input type="checkbox"/> Work	
Name	Relationship to Child	Day Time Phone	Email Address
		<input type="checkbox"/> Mobile <input type="checkbox"/> Work	

### **SECTION 2: SCHOOL SESSION INFORMATION AND SELECTION**

Please indicate the appropriate school session for your child, based on his/her age, with a check (✓).

Session	Days and Times	Yearly Tuition	Selection
3-year-old class	Th/F 9:00 am to 11:30 am	\$1,700	
4-year-old class	M/Tu/W 9:00 am to 12:00 pm	\$2,400	

### **SECTION 3: TUITION AGREEMENT**

The operation of Twelve Corners Nursery School is tuition-based; therefore, for the school to operate smoothly, families must honor their financial obligations. All families are responsible for meeting their tuition obligation to TCNS on a timely basis.

The following policies are in effect for tuition and fees:

#### **Tuition Payment And Fees**

Tuition may be paid all at once, or in 2 equal installments due Jun. 1 and Nov.1. If registration occurs after the June 1st due date, tuition is due at the time of enrollment with the final payment still due in November.

#### **Late Payments**

If a payment is made or received after the due date, it will be considered late and a charge of \$25.00 will be assessed. If a payment is more than 30 days overdue, your child may not return to school until the account is made current.

#### **Withdrawal/Refund Policy**

No tuition payments will be refunded unless full enrollment is realized. The registration fee is non-refundable.

#### **Returned Check Fee**

A \$25.00 returned check fee will be assessed for any check returned to TCNS as non-payable.

***My signature affirms that I have read, understand, and accept the terms and conditions of the above tuition agreement.***

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

### **SECTION 4: ADDITIONAL INFORMATION**

Upon receipt of this form and the deposit check, you will receive a confirmation email and your child's spot will be saved.

If you have any questions, please contact the nursery school's Director and Registrar, Sarah Zemans, at [twelvecorners.registrar@gmail.com](mailto:twelvecorners.registrar@gmail.com).

#### **Office Use Only**

**Date Received:** \_\_\_\_\_

**Payment Included:** Y N

**Check #:** \_\_\_\_\_