



***Celebrating our 22nd year as the leading early childhood experience!***

**New Student Registration Packet**  
**2022/2023**

Dear Family,

Thank you for choosing St. Therese Nursery School for your child's early childhood education. As we enter our **twenty second year** our mission is still to provide a safe, healthy, and nurturing environment where learning is a journey, not a destination. As we have continued to provide in person schooling over the past year, our school seamlessly adapted to meet the needs of our students and families in the safest way possible while still providing the spiritual, social, emotional, and cognitive growth that our children needed. Thinking outside of the box was at the forefront and the adaptations we made physically to our building to ensure the safety of the students and families has eased in this transition. Our faith has also been a testament to how we have been able to adapt and remain open to meet the needs of our families.

To register for the school year of 2022/2023 please complete the following on the pages attached or online at [www.sttheresenurseryschool.com](http://www.sttheresenurseryschool.com)

1. Complete the attached registration packet with your child's class choice.
2. Return the registration packet with the registration fee of \$35.00 or pay online on our website. Registrations and class options are made in the order received.
3. Medical forms must be completed by your pediatrician as state statutes require each of the immunizations listed by June 1, 2022. If your child has as a summer birthday, please note on this registration. The parent completes and signs off on page one and the pediatrician completes the remainder of the form. You may obtain this form from your pediatrician or a copy can be downloaded on our website.
4. The deposit of one month's tuition and a current medical form are required by June 1, 2022 in order for your child to start in September.
5. You will receive a letter by April 1, 2022 with information regarding your child's placement (a.m., p.m. or pre-K), school calendar for 2022/2023, and further information on the Meet & Greet that will occur the Friday before the start of school.

In an effort to welcome our new families and familiarize them with our school community, you will begin to receive emails from me with our monthly newsletters and invitations to STNS school events. We will also be hosting new student ice cream socials in late spring and over the summer for our new students and their families! Building the home/school connection now will ease your child and yourself to this new transition on the learning journey!

As a community of learners consisting of children, parents, and staff, we pray that our mission will inspire you over the next year.

I look forward to working with both you and your child over the next year. Our nursery school is blessed to have grown thanks to the hard work of our staff and families. Please do not hesitate to call me with any questions!

In God's Peace,

Michele Adinolfi, Director



Office Use: Program \_\_\_\_\_  
Reg. Check # \_\_\_\_\_  
Note: \_\_\_\_\_  
No Tel. \_\_\_\_\_ No Pics. \_\_\_\_\_

## St. Therese Nursery School Registration 2022/2023

**\*All information must be completed in entirety**

Sign up date: \_\_\_\_\_ Four year old \_\_\_\_\_ Three Year old \_\_\_\_\_ Allergy \_\_\_\_\_

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

Child's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Parent Address if different from above: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell phone # \_\_\_\_\_ Child Date of Birth \_\_\_\_\_

Mother Email address: \_\_\_\_\_

Mother (First and Maiden Name) \_\_\_\_\_

Occupation \_\_\_\_\_ Company Name \_\_\_\_\_

Address of Employer \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Phone number at work (include area code) \_\_\_\_\_

Religion \_\_\_\_\_ Parish \_\_\_\_\_

Father \_\_\_\_\_ Cell phone # \_\_\_\_\_

Occupation \_\_\_\_\_ Company Name \_\_\_\_\_

Father Email \_\_\_\_\_ Address \_\_\_\_\_

Address of Employer \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Phone number at work (include area code) \_\_\_\_\_

Religion \_\_\_\_\_ Parish \_\_\_\_\_ Primary language spoken at home \_\_\_\_\_ Has  
your child received services from Birth to 3 \_\_\_\_\_

### Child's Medical Information

Physician: \_\_\_\_\_ Phone (Office) \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Please list two Emergency Names Relationship to Child Telephone Number & Cell

1. \_\_\_\_\_

2. \_\_\_\_\_

The above listed emergency contacts have my permission to pick up my child from school.

Please list names and ages of other children in the family: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



## Class Preference for 2022/2023

### Directions:

1. Please check off in numerical order your class for your child for the next school year.
2. Please be aware that the classes are filled in the order that the registrations are received.

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### Three Year Old Program

1. A.M. Session Tuesday & Thursday 9:00 a.m. to 11:30 a.m. \_\_\_\_\_
2. A.M. Session Tuesday & Thursday 9:00 a.m. to 12:30 p.m.  
(Students stay for lunch) \_\_\_\_\_
3. All day 9:00 a.m. to 3:00 p.m. \_\_\_\_\_

### Four Year Old Program

1. A.M. session Monday, Wednesday, Friday 9:00 a.m. to 12:00 p.m. \_\_\_\_\_
2. Pre-K Monday, Wednesday, Friday 9:00 a.m. to 3:00 p.m. \_\_\_\_\_

### Five Day program: Monday through Friday/ Available for both three and four year olds

- a. 9:00 a.m. to 3:00 p.m. \_\_\_\_\_
- b. 9:00 a.m. to 12:00 p.m. \_\_\_\_\_

Early Drop Off: 8:00 a.m. drop off \_\_\_\_\_

\*Days attending: \_\_\_\_\_

\*Note: Days must be established in advance

\***Three Year Plan:** If you are intending to send your child to our program for three years due to a fall birthday, please check here so that the director can elaborate on this plan.

\_\_\_\_\_



**SAINT THERESE**  
*Nursery School*

555 Middletown Avenue  
North Haven, CT 06473  
(203) 234-9971

*\*If your child does not turn three until after the start of school.*

Dear Family,

The Office of Early Childhood Education has made a modification to their statutes with regards to children who under three upon the start of nursery school. Please sign and return to form below. If you have any questions, please feel free to contact me.

Sincerely,

Michele Adinolfi

Director

**Parent/Director Authorization to Enroll Child Under 3 Into Preschool Program**

I give my permission for \_\_\_\_\_, who is at least thirty two months  
(child's name)

old but not yet three years old, to transition into the preschool classroom on

\_\_\_\_\_.

(date)

I understand that the policies and procedures that are applied to children that are three years old will be applied to this child, including but not limited to, the ratio of staff to children and group size.

\_\_\_\_\_  
(Parent signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Director Signature)

\_\_\_\_\_  
(Date)



## Emergency Medical Permission

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

I give permission to St. Therese Nursery School staff to make whatever emergency (e.g. first aid, disaster evacuation) measures as judged necessary for the care and protection of my child while under the supervision of the school.

I give permission to St. Therese Nursery School staff (Director, teachers, and teacher assistants) to have access to my child's health information.

If a serious illness or accident occurs during St. Therese Nursery School attendance, I give permission to the St. Therese Nursery School personnel to secure medical care from the most immediately available licensed medical personnel, at my personal expense.

In a medical emergency where more than first aid is to be applied, I understand that in this medical situation the staff will need to contact the local emergency resource before the parent, child's physician, and/or the emergency phone contacts given by the parent.

In case of a medical emergency, I understand that my child will be transported to an appropriate medical facility by the local emergency unit (police car, fire rescue vehicle, ambulance) if deemed necessary. The child will be transported at my personal expense. The child will be taken to an emergency hospital in the company of a staff member.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent or Guardian

- A copy of this emergency medical permission form will be placed in each student's file located in the director's office. This permission form and the child's medical records will be transported with the child to the emergency hospital with the child.



**St. Therese Nursery School**

**Permission for a responsible adult (other than parent) to remove a child from the Program**

Name of Child \_\_\_\_\_

Name of alternate pick up person \_\_\_\_\_

Address \_\_\_\_\_

Phone number with area code: \_\_\_\_\_

Cell phone number with area code: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Copy of driver's license of alternate pick up person attached here:

Name of Child \_\_\_\_\_

Name of alternate pick up person \_\_\_\_\_

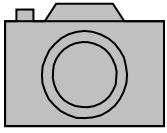
Address \_\_\_\_\_

Phone number with area code: \_\_\_\_\_

Cell phone number with area code: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Copy of driver's license of alternate pick up person attached here:



## St. Therese Nursery School Permission for Picture Publication

Dear Parents,

Throughout the year the staff will take pictures of the children during everyday play and special occasions. We use these pictures for our families gifts as well as on social media. However, pictures on social media are of the back of children's heads, hands, or feet. We do not publish any pictures of children's face. Only children with parental permission will be published. Thank you for your assistance.

Miss Michele

Child's Name \_\_\_\_\_

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

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



## St. Therese Nursery School Telephone Book

Dear Parents,

Pre-school is the perfect opportunity to form new friendships! Finding a common interest with a peer at school will lend itself to future play dates. We would like to provide a school telephone book to assist you in setting up these play dates. The telephone book will include a class list, your address for birthday invites, your telephone number, and parent names. If you would like to give permission for this information that will be distributed in the fall, please sign below.

Miss Michele

Child's Name \_\_\_\_\_

I give permission for my child's information to be placed in the St. Therese Nursery School Telephone Book. We will provide, child's name, parent first names, and mother's cell phone in this book. Addresses are not provided.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_





## Parent Handbook

**I have read and understand the contents of the St. Therese Nursery School parent handbook. I agree to follow all of the protocols and procedures listed in the parent handbook.**

**Signed:** \_\_\_\_\_

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

### **St. Therese Nursery School Parent Acknowledgement of Behavioral Management Plan**

**The Behavioral Policy of St. Therese Nursery School was discussed with me and I understand and accept the terms.**

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

\_\_\_\_\_  
**Printed Signature**

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



## REMIND Text Alert

Dear Family,

In order to distribute information quickly with regards to snow cancellations or other important reminders for our school, we now utilize a REMIND Text alert. Please sign below if you would like your cell phones (Mother and Father) to be included in this system. You will receive an initial text from REMIND asking for your permission to participate. **We require both mother and father (or two individuals) to receive this alert system.**

In addition, if you would like a grandparent or care provider to be added to this alert, please list their name and number below.

Sincerely,  
Miss Michele

Please initial here: \_\_\_\_\_

I agree to have our cell phone numbers alerted for the REMIND text alert.

In addition, I would like the following people to be added to the REMIND text.

Name \_\_\_\_\_ Cell # \_\_\_\_\_

Name \_\_\_\_\_ Cell # \_\_\_\_\_

Name \_\_\_\_\_ Cell # \_\_\_\_\_



## St. Therese Nursery School Registration Checklist New Student

1. Registration form completed \_\_\_\_\_
2. Completed Emergency Medical Release \_\_\_\_\_
3. Completed Alternate pick up form \_\_\_\_\_  
\* Please fill out two alternate pick ups for your child. You will return a copy of the license by June 1<sup>st</sup>.
4. Payment of \$35.00 non-refundable registration fee \_\_\_\_\_
5. Telephone book release form \_\_\_\_\_  
\* If you are giving permission \_\_\_\_\_
6. Picture release form \_\_\_\_\_  
\* If you are giving permission \_\_\_\_\_
7. Class preference form \_\_\_\_\_
8. Parent handbook reviewed \_\_\_\_\_  
With behavioral policy sign off \_\_\_\_\_
9. Child Under Three Endorsement \_\_\_\_\_  
\*To be signed if your child turns three after the start of the school year.



### Information that you will receive by **April 1, 2022:**

1. **A school calendar for 2022/2023**

2. **Meet & Greet Date & Times**

This is an opportunity for you and your child to meet your child's teacher, teacher assistant, classmates, and familiarize them with their new classroom.

2. **Your child's placement type**

\*Teacher assignment is sent in August

### Information that you must be mail to the school by **June 1, 2022**

1. **One month tuition payment that holds your spot for the fall of 2021.**

This payment becomes the June 2022 tuition payment and is not refundable. You will then pay the months of September through May.

2. **New medical records (for new students only). Current students receive medical renewal reminder notices a month before their medical form expires.**

3. **Pictures for alternate pick-up approved individuals**

### In the August **Mailing you** will receive:

1. **Your child's teacher name and classroom location**

2. **The time of your Meet & Greet visit**

### At Meet & Greet you will receive:

1. **A St. Therese Nursery School tote bag for new students. We ask that all students use the tote bag. The tote bag provides independence skills in placement of your child's work as well as spacing in the cubbies. We realize there are many backpacks that children enjoy and encourage you to use one for library visits! If you are a returning student and are in need of a new tote bag, please see Miss Michele at Meet & Greet.**
2. **Tuition envelopes for September through May**
3. **Welcome letter & Transition information**



**St. Therese Nursery School  
Family Registration  
To Join**

**St. Elizabeth of the Trinity Parish  
Comprised of all three North Haven Churches  
St. Therese, St. Francis Cabrini, St. Barnabas**

**If you would like to join the parish family of St. Elizabeth of the Trinity, please call the parish office at:**

**203-239-5378 to register. We welcome you to our faith community!**