

LNS GENERAL REGISTRATION AND INFORMATION FORM

Please return form with a \$35 non-refundable registration

fee to: Lyme Nursery School, Attention
Director/registration, 155 Dartmouth College Highway, Lyme,
NH 03768

Child's Name: _____ Date of
Birth: _____

Information about your family is confidential and is gathered solely for the purpose of helping us understand and care for your child.

Please circle desired curriculum for which you want to register your child

4 Year Old Program: Core Curriculum: 8:00-12:30 Extended Day 12:30-4:00
(4 by 9/30/19) M/Tu/Th/F (\$528month)
M ___ T ___ Th ___ F (\$27/day)

Additional Morning: 8:00-12:30 Extended Day: 12:30-4:00
___ W (\$33/day) ___ W (\$27/day)

3 Year Old Program: Core Curriculum: 8:00-12:30 Extended Day: 12:30-4:00
(3 by 9/30/19) M/W/F (\$396 month) M ___ W ___ F ___ (\$27/day)

Additional Morning: 8:00-12:30 Extended Day: 12:30-4:00
___ T ___ Th (\$33 day) ___ T ___ Th (\$27/day)

Additional days space permitting. For Bears and lions.

2 Year Old Program: Tuesday/Thursday 8:00 to 12:30 (\$264 month)
(2 by 8/ 1/19)

Contact Information:

Mother's name Home Address Phone/email

Mother's place of employment Phone

Father's name Home Address Phone/email

Father's place of employment Phone

If parents are divorced, who has custody of the child? _____

If child is not living with parent(s), name/address of legal guardian(s): _____

Siblings: Name _____ Age _____
Name _____ Age _____
Name _____ Age _____