

CANAL TOWN NURSERY SCHOOL



MOMMY & TOT

**Registration Application for Admission  
Mommy and Tot  
2008 - 2009**

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

Nickname \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (    ) \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Father's Work (    ) \_\_\_\_\_ Mother's Work (    ) \_\_\_\_\_

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

Accompanying My Child To Mommy and Tot Will Be: \_\_\_\_\_

In Case of Emergency Call: Name \_\_\_\_\_ Relationship \_\_\_\_\_

**This number must be different than your home telephone number:** (    ) \_\_\_\_\_

Does your child have any special needs that our teachers should be aware of? If yes, please explain: \_\_\_\_\_

I am registering me and my child for: (Circle all that apply)

**Session 1 : 8 weeks**

“Trees and Leaves: Reaching the  
Tree Tops Together”  
October 7- November 21  
Tuesday morning only  
Friday morning only  
Tuesday & Friday mornings

**Session 2: 6 weeks**

“Exploring Our Senses”  
January 6 – February 13  
Tuesday morning only  
Friday morning only  
Tuesday & Friday mornings

**Session 3: 6 weeks**

“Lions & Toddlers & Bears,  
Oh My!”  
February 24-April 3  
Tuesday morning only  
Friday morning only  
Tuesday & Friday mornings

**(Over)**

I ***DO/DO NOT*** give permission for my child's photo to be used in Canal Town Nursery School printed ads, media and brochures for public relationship purposes.

I ***DO/DO NOT*** give permission to Canal Town Nursery School to use my name, address and phone number on a parent-to-parent contact list for activities outside of CTNS.

A non-refundable \$10.00 registration fee must accompany this application. Check should be made payable to CTNS. Please return completed form to: Canal Town Nursery School, P.O. Box 415, Palmyra, New York 14522 **Attention: Mommy and Tot**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_