

Calvert Nursery School

P.O. Box 1762
Prince Frederick, MD 20678
Phone 410-535-0577

APPLICATION FOR ENROLLMENT

Child's Name: _____ Birth Date: _____

Mother's Name: _____ Father's Name: _____

Mother's Address: _____

Father's Address: _____

Home Phone #: _____ Email: _____

Please enroll our child in the following class:

Three Year Olds

(Must be 3 by Sept. 1)

Four Year Olds

(Must be 4 by Sept. 1)

We prefer: Morning

Afternoon

No Preference

Please list any special health or educational concerns at this time:

Priority Status (applies only to applications received prior to February 1):

Currently Enrolled

Sibling attended CNS Year?

None

We first learned about the Calvert Nursery School through:

I understand that Calvert Nursery School is a parent-operated cooperative and I will be available and willing to cooperate in the operation of the school. Parental obligations will be explained by the Membership Chairperson and/or President prior to acceptance.

If you are interested in being part of or learning more about the 5 volunteer positions on the Board of Directors, which are nominated and elected each April, check this box and someone will contact you.

Parent Signature

Date

Parent Signature

Date

Applications must be returned by mail, accompanied by a \$50 non-refundable application fee to:

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