



CHRIST CHURCH NURSERY SCHOOL

254 EAST PUTNAM AVENUE | GREENWICH, CT 06830
(203) 869-5334 | CCNSGREENWICH.ORG

Child's Name _____ Date of Birth _____ Male ___ Female ___
Last First

E-Mail _____

Address _____
Street Town Zip

Father's Name _____ Occupation _____

Business Address _____ Cell _____

Mother's Name _____ Occupation _____

Business Address _____ Cell _____

Are you a member of Christ Church? _____ Yes _____ No

Name(s) of siblings who attended CCNS and dates attended _____

Are you applying for scholarship funds? _____ Yes _____ No

Please check all appropriate sections that you WILL accept – please number in order of preference:

***** CCNS will do its best to accommodate your preferences. Please see the attached page indicating the order in which applications for admission into the school are accepted. *****

2's AM Program

_____ 2's - Mon./Wed./Fri. (9:00 – 11:30am)

_____ 2's - Tues./Thurs. (9:00 – 11:30am)

2's PM Program (days vary according to demand)

_____ 2's - (2 day) M T W TH F (11:45 – 1:45pm) -- (Circle all days you will accept)

_____ 2's - (3 day) M T W TH F (11:45 – 1:45pm) -- (Circle all days you will accept)

_____ 2's - (4 day) M T W TH F (11:45 – 1:45pm) -- (Circle all days you will accept)

3's Program

_____ 3's - (3 day) M T W TH F (9:00 – 12:00pm) -- (Circle all days you will accept)

_____ 3's - (4 day) M T W TH F (9:00 – 12:00pm) -- (Circle all days you will accept)

_____ 3's - (5 day) (9:00 – 12:00pm)

4's Program

_____ 4's - Mon. – Fri. (9:00 – 12:00pm)

Connecting Program

_____ 5's - Connecting - Mon. – Fri. (9:00 – 2:00pm) Preschool attended _____

Application Fee

Please return the completed application with a \$25.00 non-refundable check (application fee) made payable to Christ Church Nursery School. (Re-Enrolling children are not required to pay the \$25.00 application fee.)

Acceptance

You will be notified regarding acceptance into the program in writing. If you choose to join us and accept a placement in our program, a written response (email is acceptable) and a non-refundable deposit of \$1000 is required.

_____ **Parent Signature**

_____ **Date**

When did you obtain this application? _____

Tell us how you learned of our program (circle one):

Friend Website Ad Real Estate Agent Other _____

****FOR OFFICE USE****

_____ **Date received**