



Christ Church Parish Day School

STUDENT APPLICATION

Child's Name _____ Age by Sept. 1st _____ Gender _____
Birth date _____ Prefers to be called _____ Place of Birth _____
Home Address _____

Number _____ Street _____ Town _____ Zip _____
Home Phone _____ Cell Phone _____ Email _____

Parent/Guardian Name _____	Parent/Guardian Name _____
Occupation _____ Hours _____	Occupation _____ Hours _____
Business Name _____	Business Name _____
Business Address _____	Business Address _____
Work Phone _____	Work Phone _____

Mailings to a second address? _____

Are parents active members of Christ Church? _____yes _____no

Have parents had a child at CCPDS before? _____yes _____no If so, year and child's name _____

Is a parent a CCPDS alumni? _____yes _____no

If so, years attended and name _____

Has your child attended another preschool? _____ If so, for how long? _____

School Name _____

Address _____

Names of siblings	Date of Birth	Grade/School
-------------------	---------------	--------------

_____	_____	_____
_____	_____	_____
_____	_____	_____

Why are you interested in Christ Church Parish Day School for your child?

How did you hear about Christ Church Parish Day School?

What are your expectations for your child's school experience?

Other pertinent family information, additional thoughts, or concerns:

Do you have any special talents/skills that could enhance the children's experience here at Christ Church (music, carpentry) and would you want to volunteer your time?

Would you be interested in our "Adventure Friday" program from 9 to 1?

_____ yes _____no

Would you be interested in our Afternoon Enrichment program until 3:00 Mon. – Thurs.?

_____ yes _____no

The Admissions Committee places children based on age and gender.

Young 3 year old program (Orange Room)	9:00-11:45 am	Mon., Tues.,
Mid 3 year old program (Green Room)	9:00-11:45 am	Wed., Thurs. and Fri.

Older 3 year olds and younger 4 year olds (Yellow Room)	9:00-11:45am (Sept.-Dec.)	Mon. thru Thurs.
	9:00 – 1:00pm (Jan.-June)	

4 and 5 year olds (Red & Blue Rooms)	9:00am-1:00pm	Mon. thru Thurs.
--------------------------------------	---------------	------------------

Terms: All applications are due by January 15th . Each application for enrollment must be accompanied by a non-refundable registration fee of \$50. A \$500 deposit must be received within two weeks of your letter of acceptance. The deposit is applied toward tuition and is non-refundable after March 31st. . *Withdrawal after May 15th results in responsibility for full tuition payment, unless the place can be filled.* Please include your \$50 registration fee, payable to Christ Church Parish Day School, with this form and mail to:

Christ Church Parish Day School Admissions
149 Asbury Street
South Hamilton, MA, 01982

In requesting admission for my child, I agree to the policies of the Day School as described above and/or in any other pertinent information presented to me prior to or concurrent with admission.

Signature of parent/guardian(s) _____ Date _____

Up to 50% scholarship aid is available based on need, please contact the Day School office for more information at 978-468-7892.

Christ Church Parish Day School does not discriminate in providing services to children or their families on the basis of race, religion, cultural heritage, national origin, marital status, political beliefs, disability, or sexual orientation.

(Office Use Only)

App. Received _____ Registration Fee _____ Deposit Received: _____ Wait List _____