



Berwyn United Methodist Nursery School

140 Waterloo Ave ♦ Berwyn PA 19312

610-296-2246 ♦ BUMNS.org

Registration Form

- 1. We are interested in the [] 5-Day [] 4-Day [] 3-Day [] 2-Day [] January 2-Day program.
2. Child's name _____ child goes by _____
3. Birth month _____ day _____ year _____ gender _____
4. Address _____
no. street city township zip
5. Home telephone _____ mobile _____
6. Previous school _____ when _____
7. Parent's name _____ occupation _____
Business address _____ phone _____
E-mail _____ [] add to school list
8. Parent's name _____ occupation _____
Business address _____ phone _____
E-mail _____ [] add to school list
9. Does either parent have a background in elementary or early childhood education?
parent _____ level _____
10. Parents are [] together [] divorced [] separated [] deceased
11. Other children in family (names and ages) _____
12. Allergies _____ special needs or disabilities (if any) _____
13. Emergency names to be called if neither parent can be reached (local only):
Name _____ address _____ phone _____
Name _____ address _____ phone _____
14. Family doctor _____ phone _____
15. Religious affiliation: mother _____ father _____
16. [] I grant BUMNS permission to publish anonymous photographs of my child on their website.

Please note:

- To give more detailed information, please attach another sheet.
• Attach a registration fee of \$85.00 (\$45 for January 2-Day class) and return to school.
Registration fees are not refundable or deductible from tuition.
• Wait-list applications require no registration fee.
• To protect the interest of all our students, the school reserves the right to dismiss a student if, in the judgment of the school authorities, such action is deemed to be in the best interest of the school.

Parent's signature _____ date _____

Office use only: Date application received _____
Payment received: amount \$ _____ check # _____