

# Open Gate Nursery School

2124 Brewster Avenue, Redwood City, CA 94062  
(650) 369-6833 www.ogns.org

## REGISTRATION 2012-2013

	2-Day*	3-Day*	Pre-K <i>(see note)</i>
	Tu/Th 9-11:30AM	M/W/F 9-11:30AM	M/T/W/Th 12:30-3:15PM
Annual Registration Fee:	\$50	\$50	\$50
Annual Maintenance Fee: (all families)	\$50	\$50	\$50
Monthly Tuition:**	\$175	\$270	\$345
Monthly Nursery Fee (younger sibling):	\$80	\$80	\$80

10% Reduction for additional child

\*Diapers okay

\*\*Included are fees for parent education classes held twice monthly on Tuesday evenings from 7 - 9 pm.

*Note: Pre-K Program schedule is determined by enrollment. If minimum enrollment for a four-day/week program is not achieved, program will be scheduled for M,T,TH from 12:30-4pm, and tuition will be reduced accordingly.*

Age Requirements:	T/Th Program AM:	Must be 2 years old by Nov. 1 (child must be 2 to enter)
	M/W/F Program AM:	Must be 3 years old by Dec. 2
	Pre-K Program PM:	Must be 4 years old by Dec. 2

Thank you for your interest in Open Gate Nursery School. *To reserve a place for your child on the waiting list, we require a non-refundable \$50 fee (\$15 more for each additional child).* Please complete the information below and return it with your check made out to Open Gate Nursery School to: Registrar, 2124 Brewster Avenue, Redwood City, CA 94062

Child's Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Sex: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

Please rank your preferred participation day (i.e. 1<sup>st</sup>, 2<sup>nd</sup>, etc.); leave blank if unable to work a particular day:

T/Th AM Program:	Tues. _____	Thurs. _____	
M/W/F AM Program:	Mon. _____	Wed. _____	Fri. _____
Pre-K PM Program:	Mon. _____	Tues. _____	Wed. _____ Thurs _____

If you plan to use the nursery, list name(s) and birth date(s): \_\_\_\_\_

I/We, the undersigned, would like to enroll in Open Gate Nursery School. I/We agree to abide by the rules and requirements of the program. I/We further agree to meet the financial obligations. I/We declare that I/We are in good health and able to fulfill the duties required of participating parents.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Open Gate Nursery School does not discriminate on the basis of race, color, national origin, sexual orientation or handicap in its educational programs, activities, or employment practices.*