



Swarthmore Friends Kindergarten Enrichment

Swarthmore Friends is accepting applications for our morning and afternoon enrichment program. You may register for either 3 or 5 days a week. Your child will come to us at 9:00 a.m. and enjoy outdoor playtime, indoor free play, art projects, games, snacks and lunch before heading to kindergarten for their afternoon session. If your child is a morning kindergarten student, they will come to us after school for an afternoon of fun with all of the same activities. Please see the reverse side for an application. Spots are limited!

We are located on the Swarthmore college campus. If your child attends school in the Wallingford-Swarthmore school district, busing to and from kindergarten is provided. We welcome students from outside WSSD but regretfully, we cannot provide transportation.

Swarthmore Friends Nursery School
610-990-5542

Kindergarten Enrichment Application 2016-2017 School Year

Child's Name: _____

Gender: M F

Nickname, if used: _____

Birth Date: _____

Address: _____

Telephone: _____

Email: _____

Home School: SRS WES NPE OTHER

Morning Kindergarten Enrichment (5 days; 9:00 a.m.-Kindergarten Bus Pick-Up) \$3900/year

Afternoon Kindergarten Enrichment (5 days; Bus Drop-off until 2:30 p.m.) \$3900/year

Part-time Kindergarten Enrichment Part-time (3 Days-Same Hours as above) \$2800/year

Please circle which days your child will attend: M T W Th F and AM or PM

1/10th tuition due at registration as non-refundable deposit (remainder of tuition paid monthly throughout school year). Please make checks payable to Swarthmore Friends Nursery School. Swarthmore Friends Nursery School does not discriminate on the basis of race, religion or nationality.

Family Information

Father's Name: _____

Occupation: _____

Mother's Name: _____

Occupation: _____

Others in household (please list names, relationship and any SFNS alumni)

Please list any information (allergies, special needs, fears, etc.) that the teaching staff should have about your child:

Emergency Contacts

Parents' daytime phone numbers (please include cell phones as appropriate)

Father: _____ Mother: _____

Family member, friend and/or daycare provider

Name: _____

Phone: _____

Name: _____

Phone: _____

Family Doctor _____

Phone: _____

I hereby give permission for my child to participate in activities that may take place off the premises of Swarthmore Friends Nursery School under the guidance of the staff.

Name: _____ Signature _____