



CLASS OFFERINGS:

MORNING SESSION	8:45 - 11:15
LUNCH BUNCH	11:15 - 12:15
EXTENDED DAY	11:15 - 2:45
AFTERNOON SESSION	12:15 - 2:45

To register for the **FIRST FRIENDS** class, children must: reach their **THIRD** birthday between October 1, 2011 and January 31, 2012; be toilet trained; be ready for a group setting; be able to leave their parent. There is some flexibility regarding August and September birthdays for admission to this group. First Friends is a 2 day/week program.

To register for a **THREE-YEAR- OLD** class, children must: reach their **THIRD** birthday on or before October 1, 2011; be toilet trained; be ready for a group setting; be able to leave their Parent. Three year old classes are offered 2 or 3 days/week.

To register for a **FOUR-YEAR-OLD** class, children must reach their **FOURTH** birthday on or before October 1, 2011. The four year old program is offered 2 or 3 days/week.

To register for the **FIVE DAY Pre-K** class, children must: reach their **FOURTH** birthday on or before October 1, 2011 or be **FIVE** years old. This class is designed for four and five year olds who have had a previous preschool experience and may be ready for more than a three day program. This class is offered Monday through Friday mornings

To register for the **KINDERGARTEN ENRICHMENT**: children must reach their **FIFTH** birthday on or before October 1, 2011. Kindergarten Enrichment is offered 2, 3 or 5 afternoons a week. Cucinella & Flocktown-Kossmann children will begin at 11:00am and dismiss at 2:45pm. Old Farmer's Road School children will begin at 11:45am and dismiss at 2:45pm. Children attending Cucinella may take a regularly scheduled Washington Township Public School bus to LVCNS where they will be met by an LVCNS teacher. Flocktown-Kossmann & Old Farmers Road School children will need to provide their own transportation.

APPLICATION FOR LONG VALLEY CHRISTIAN NURSERY SCHOOL

2011-2012 ACADEMIC YEAR

Name of Child _____ Sex ___ M ___ F DATE OF BIRTH _____

Child's Address _____ Age by 10/01/11 _____ Years _____ Months

City, State, Zip _____ Home Phone _____

Names of Parents _____ Address of Parents (if different) _____

Parent's Occupation _____ Parent's Occupation _____

Cell Phone _____ Cell Phone _____

Does child live with both parents? (Y/N) _____ Email Address: _____
If "no" please explain custodial/financial arrangements on the back of this form. * Invoices will be sent as a reminder via email only.

Is your family:
 A Zion Church Member? (Y/N) _____ A current LVCNS Family? _____ A former LVCNS family? _____

Please indicate your first choice of class and session by writing "1" on the appropriate line. Please indicate your second choice by writing "2" and your third choice by writing "3". Children who register will have preference on the Waiting List if necessary. We will do our best to accommodate every family's first choice. Classes will be formed based on demand. If enough children are not registered for a particular class, we reserve the right to cancel that class.

Class Choice:

FIRST FRIENDS (T/Th) _____ p.m. only	FIVE DAY PRE-K (M-F) _____ a.m. only
TWO DAY THREES (T/Th) _____ a.m. _____ p.m.	TWO DAY FOURS (T/Th) _____ a.m. only
THREE DAY THREES (MWF) _____ a.m. _____ p.m.	THREE DAY FOURS (MWF) _____ a.m. _____ p.m.

Kindergarten Enrichment p.m. only	
2 Days (Tu/Thurs)	_____
3 Days (MWF)	_____
5 Days (M-F)	_____

Please enclose a \$50 check made payable to LVCNS for the NON-REFUNDABLE APPLICATION FEE. No application will be processed without this fee or the signature of a parent. A separate application must be completed for each child in a family.

Parent Signature: _____