



Woodland Parent Nursery School Application for Admission

Mail to: Attn: Membership
655 Fourth Street
Woodland, CA 95695
Email to: wpns_membership@yahoo.com

For Office Use Only				
Term:	<input type="checkbox"/> FA	<input type="checkbox"/> SP	<input type="checkbox"/> SU	Year: _____
Child Days:	T	W	TH	F
Parent Days:	1 st	2 nd	3 rd	
<input type="checkbox"/> Registration Fee (New \$30; Returning \$15)				
<input type="checkbox"/> Physician Report		<input type="checkbox"/> SB792 compliant		
<input type="checkbox"/> Emergency Card				
<input type="checkbox"/> Birth Certificate				
<input type="checkbox"/> TB Test (Expires: _____)				
<input type="checkbox"/> Adult Ed Form				
<input type="checkbox"/> Proof of Car Insurance (optional)				

CHILD'S FULL NAME _____
First Middle Last

CHILD'S DATE OF BIRTH _____ NICKNAME (or name to use in school) _____

HOME ADDRESS _____
Street
City State Zip

HOME PHONE _____

E--MAIL ADDRESS _____

WHO WILL BE THE PRIMARY WORKING PARENT OR GUARDIAN?
(This will be the main person contacted for work, meetings, fundraising, etc.)

MOTHER FATHER BOTH OTHER _____

MOTHER OR GUARDIAN _____

ADDRESS AND PHONE (if different from above) _____

CELL PHONE _____

WORK PLACE AND PHONE _____

FATHER OR GUARDIAN _____

ADDRESS AND PHONE (if different from above) _____

CELL PHONE _____

WORK PLACE AND PHONE _____

OTHER (working person) _____

ADDRESS AND PHONE _____

CELL PHONE _____

WORK PLACE AND PHONE _____

I would like to enroll myself and my child in WPNS starting: FALL SPRING SUMMER _____

Year

I would like my child to attend: T W TH F

My choices for parent work days are: 1st choice ____, 2nd choice ____, 3rd choice ____.

Comments:

Woodland Parent Nursery School Parent Contract

I AGREE to the following:

1. To provide the following registration materials prior to my child's first day of attendance:
 - Physicians' report for my child
 - Copy of birth certificate for my child
 - Emergency and Medical Release Form
 - Negative TB test results for each working adult
 - Proof of Measles and Pertussis Immunization for each working adult
 - Registration Fee & 1st month's tuition
2. To spend the required number of volunteer hours, from 8:30 to 12:30 on assigned days, directly interacting and observing the children in the nursery school. Example of work schedule: for a child attending 2 days a week, parent works 2 days a month plus 1 day per semester.
3. To secure another member to substitute when my absence is necessary, and repay their time in kind or at the minimum wage rate.
4. *To submit, at the beginning of the school year, proof of auto insurance if driving on field trips.
5. *To give permission for my child to take school field trips off the school grounds. The school will provide adequate adult supervision.
6. The Director has my permission to release my child to the person(s) listed on the emergency card.
7. *To attend the school's evening meetings once a month, plus one full day Saturday meeting (TBA). Missing a meeting will result in a \$50 fine and an extra work day(s). (In the event of an emergency it is possible to avoid this penalty by contacting the director or a board member to discuss.)
8. *To participate in each semester's work party for a minimum of four (4) hours. That is a total of eight (8) hours per year. Missing a work party will result in a \$50 fine.
9. To take my turn providing for the weekend cleaning and maintenance of the school. Missing scheduled weekend maintenance will result in a \$50 fine.
10. *To meet each semester's fundraising requirement of \$150, for a total of \$300 per year. This can be bought out or fulfilled in part by the Annual Auction participation or other fundraising events.
11. *To participate in the Annual Auction; sell tickets, solicit donations, donate food to the event and perform committee work.
12. *To have a school job assignment.
13. To allow use of my child's photo or video recording for the sole purpose of WPNS publicity.
14. To pay all tuition, fees and fines by the 10th of the month.
15. To give at least two (2) weeks written notice, and bring all my participation and financial obligations up to date if it should become necessary to withdraw from the School prior to the end of the school year.
16. To have a wonderful time with my child at WPNS!

SIGNED _____ DATE _____

* Not applicable to Summer School