

Country Village Day School

Registration Number:

Date Registration Received:

Administration Use Only

Pre-Enrollment Form

Thank you for your interest in Country Village Day School.

To pre-enroll at Country Village Day School, please return this completed form to LindaTepper@countryvillagedayschool.org

| | Parent/Guardian Name: | Parent/Guardian Name: | |
|---------|-------------------------|---------------------------------|-----------------------------|
| | Cell Phone Number: | Cell Phone Number: | |
| | Email Address: | Email Address: | |
| Pre-l | Enrollment Information: | | Sumer Dr. Out and Andration |
| 1. Chil | d's Name: | _ Date of Birth: | 6° 6° 4° |
| 2. Chil | d's Name: | _ Date of Birth: | |
| 3. Chil | d's Name: | Date of Birth: | |
| | Summer Only- (| (June 24, 2024-August 23, 2024) | |
| | Summer & Fall | (June 24, 2024- June 18, 2025) | |
| | Fall Only (Au | igust 28, 2024-June 18, 2025) | |
| | Preferred Schedule | (select one): | |
| | Monday-Friday Ful | ll Days | |
| | Monday/Wednesda | y/Friday Full Days | |
| | Tuesday/Thursday | Full Days | |
| | | | |