

Parent/Child Program Application

CHILD'S NAME	-	BIRTH DATE
Parent/Caregiver Name #1	Cell	Email
Mailing Address		
Parent/Caregiver Name #2	Cell	Email
Mailing Address (if different from #1)		
Child Food Allergies /Special Considerations		
Please select the program you	would like to att	eend with your child.
*Please note that these programs follow the sa unless otherwise commu The calendar of scheduled vacations is a	ınicated by the progı	ram leader.
MOON GARDEN		STAR GARDEN
Caregiver/Infant Fridays 1:00 – 2:30pm		regiver/Younger Toddler Hays 8:30 – 10:00
Session 2: March - June	Ses	esion 1: October - February esion 2: March - June
	•	-
MORNING GARDEN MORNI	NG GARDEN	MORNING GARDEN
Tuesdays 9:00 – 11:00am Wednesd	ays 9:30 – 11:30ar	m Thursdays 9:00 – 11:00am
In the event that the Morning Garden section you p	refer is filled, pleas	se indicate your second choice here:

Please see additional information on page two of this application.



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Sliding Scale Session I: \$525-900

Sliding Scale Session II: \$525-900

Sliding Scale Session I & II: \$1,000-1,700

For details about our sliding scale, visit www.bayschool.org and click the Parent/Child tab.

*Please do not send a check until you receive an invoice from The Bay School

Placement must be confirmed before payment is made.

Please consider signing up for the full year to ensure a space in Session II. Enrollment for Session II will open to new families beginning November 1, and we expect any open spaces to fill at that time. Those enrolling for both sessions can elect to pay tuition in up to five monthly installments from September - January. For those signing up for only one session, payment in full at the time of registration is expected. If your family would like to request a payment plan, please email Head of School Marcia Diamond at marciadiamond@bayschool.org.

If you have more than one child and would like each to participate, please contact program leader Margot Entwisle at margotentwisle@bayschool.org

After filling out this application, you will be contacted by Margot to finalize the registration process, or to be added to a waiting list. Once registration is complete, you will receive an invoice to pay for your child's enrollment in the program. Thank you for your interest.

	ents have my consent to take photographs of my child and to use d by the school. No names or identifying information will be used on d media.
I give my consent.	I do not give my consent.

Parent/Guardian Signature