

585 General Steuben Rd, King of Prussia, PA 19406 umbaptistnurseryschool@gmail.com

Application 2023-2024

Child's First & Last Name:				
Child's birth date:		Gi	rl	Воу
Address:				
Mom's Name:				
Phone:	Email:			
Dad's Name:				
Phone:	Email:			
Does your child feed his/hersel	f? Does y	our child enjoy playin	g with o	thers?
Does your child have a medical o	diagnosis? (Allergy, Au	itism, RSV, etc)		
If yes, please indicate:				
Does your child need any accom	modations to attend s	school?		
If yes, please describe:				
Please Indicate Preferred Cl	ass (include 1 st & 2 nd	d choice if applicable	e)	
2 Year Olds MWF 2 Year Olds TTh		Olds TWTh Olds MTWTh Olds MTWThF		Pre K MTWTh Pre K: MTWThF Pre K: MTWTh PN
** Potty trained kids may Lunch	n Bunch M-Th until 2p	m, extra fees apply		
Non-refundable application fee	: \$80			
Office Use				
Payment Method	Date paid	TE explained & form given		