

Children's Day School of Wilton

RETURNING FAMILY REGISTRATION APPLICATION 2024-2025

Please fill out a separate application and submit a separate check for each child
If submitting electronically, please send to office@csw.org

Child and Family Information

Child's Full Name:	Preferred Name in School:
Date of Birth:	Gender:
Parent Name:	Parent Name:
Home Address:	Secondary Home Address (if applicable):
Preferred Email Address (for school communication):	Preferred Phone Number (for directory and class list):
Name(s) of other preschool(s) child has attended:	

<u>Siblings</u>		
Name(s)	Birthdate(s)	Years Attended CDSW (if applicable)

Program Choice

PLEASE NOTE: Class offerings are subject to change due to enrollment.
Specific program days are to be determined.

TWOS CLASSES

8:45 am - 11:45 am ~ *Snack Only*

_____ **2 - Day Twos**

_____ **3 - Day Twos**

Special Requests:

THREES CLASSES

9:00 am - 12:30 pm ~ *Children Bring Lunch & Snack*

_____ **3 - Day Threes**

_____ **4 - Day Threes**

Special Requests:

FOURS CLASSES

9:00 am - 1:00 pm ~ *Children Bring Lunch & Snack*

_____ **4 - Day Fours**

_____ **5 - Day Fours**

Special Requests:

FIVES CLASS

8:45 am - 1:15 pm ~ *Children Bring Lunch & Snack*

_____ **5 - Day Fives**

Registration Fees

TWOS, THREES & FOURS

A registration fee of \$200 must accompany each registration application. This fee will be refunded only if your child is placed on a waitlist and does not receive an offer of enrollment for the 2024-2025 school year. Refunds will not be given if an offer of enrollment is declined.

FIVES PROGRAM

A registration fee of \$500 must accompany each registration application. This fee will be refunded only if your child is placed on a waitlist and does not receive an offer of enrollment for the 2024-2025 school year. Refunds will not be given if an offer of enrollment is declined, unless the spot can be filled, in which case \$300 will be refunded. For enrolled children, \$300 of the \$500 fee will be applied to the first tuition payment.

Parent Signature: _____ **Date:** _____

For potential scholarship applications, please see the Director.