

CORNER CO-OP NURSERY SCHOOL, INC.
1773 BEACON STREET
BROOKLINE, MA 02445
617 . 738 . 4631 www.cornercoop.org

DATE _____ REG _____ CON _____

Indicate Choice:

2 3 4 5 mornings/week
M TU W TH F days preferred

The CORNER CO-OP operates from September through June, 9 a.m. to noon for children who are 2.9 to five years of age. Partial scholarship aid may be available. A \$50 NON-REFUNDABLE application fee must accompany this application. Acceptance Letters are mailed in January. Upon acceptance a \$150 registration fee and a \$300 tuition deposit will be required by 2 weeks from the date your acceptance letter is mailed to you. This holds your child's place. This money is NON-REFUNDABLE. The \$300 tuition deposit is applied to the second semester tuition bill. Tuition is payable in two installments or with a payment plan arranged with the receipts treasurer. **NO APPLICATION WILL BE CONSIDERED UNLESS ACCOMPANIED BY THE ATTACHED PLEDGE FORM.**

Child's Name _____

Nickname _____

Date of Birth _____

Parent/Guardian _____

Parent/Guardian _____

Address _____

_____ Zip _____

Home Phone _____ Work Phone _____ Are you a former member of the Corner Co-op? _____

Email: _____

Does your child have health insurance? Yes _____ No _____ Are you a member of the All Saints Church? _____

Has your child had any previous group play experience? _____ (play group, nursery school, Sunday school, etc.)

Please describe: _____

Does your child have any physical or emotional disabilities? _____

Please describe: _____

Does your child speak English? _____ If not, what language? _____

What do you want your child to gain from his/her nursery experience? _____

Why are you interested in a co-operative nursery school? _____

If you are interested in early drop-off (8:30), please indicate which days: M TU W TH F

If you are interested in lunch program (until 2:00) please indicate days: M TU W TH F

If you are interested in late pick-up (until 2:30) please indicate days: M TU W TH F

Make checks payable to the **CORNER CO-OP NURSERY SCHOOL, INC.**

Return application and \$50.00 fee to:

Admission Coordinator
Corner Co-op Nursery School
1773 Beacon Street, Brookline, MA 02445-4299
617. 738. 4631

PLEDGE FORM

A parent co-operative nursery school requires a special commitment on the part of its members to ensure that this experience is a rewarding one for the parents as well as the child. Accordingly, the Corner Co-op Nursery School asks its prospective members to acknowledge the following obligations:

1. TO WORK AS A TEACHER-ASSISTANT IN THE CLASSROOM

You can expect to work between 11 & 14 days during the school year. If you are unable to serve when scheduled, you must find a substitute among the other members of the Co-op.

2. TO SERVE AS AN OFFICER OR FILL A SPECIFIC JOB

All new members are invited to a meeting of the Co-op in May or June. At that time, the work of the officers and ongoing jobs is outlined and volunteers are sought.

3. TO ATTEND MEMBERSHIP MEETINGS

The Co-op meets every six weeks to conduct the regular administrative business of the school and discuss educational issues; attendance by at least 1 parent is required. The nature of a cooperative organization is such that there must be a common interest among all members to share equally in the running and decision-making of the school. The meetings are attended by the teachers; parents are encouraged to consult with them about activities or procedures in the classroom.

4. TO ATTEND BASIC FIRST AID WORKSHOP

This is held at the school for each parent planning to work in the classroom.

5. TO PITCH IN WHEN SPECIAL PROJECTS ARE UNDERTAKEN

Fund raising, building equipment, major clean-ups, etc.

6. TO PRESENT A HEALTH FORM FOR EACH PARTICIPATING CHILD

Completed by his/her pediatrician. A physical and immunizations/vaccinations for DTaP, MMR, Polio, Hib, Hep B and Varicella are a requirement for acceptance to the school. Also, completion of all other required forms.

THE PRECEDING OBLIGATION FULFILLS STATE AND TOWN HEALTH REQUIREMENTS AND ARE DUE WHEN SCHOOL BEGINS.

7. TO HAVE FUN, BE SAFE, USE YOUR IMAGINATION AND BE KIND!

PLEDGE: I recognize that the above obligations are a requirement of our family's membership in the Corner Co-op Nursery School, Inc. If my child is enrolled in the program, I will pay the tuition fees when due and participate in the Co-op as a full and active member.

Signature

date

signature

date

The Co-op tries to achieve a reasonable balance regarding sex and age. Therefore, when possible, applications are processed on a first come, first served basis. Preference is given to returning children, siblings and at least one church family until December 1st.