

**Registration Application for 2022-2023**

*Wellesley Nursery School in the Hills  
207 Washington Street  
Wellesley Hills, MA 02481  
781-237-9137 wnsh.org*

Name of child - son/daughter \_\_\_\_\_

Date of Birth \_\_\_\_\_

Preschool 1: (2.9-3yrs): 8:40-11:40: 3 days\_\_\_\_ 4 days\_\_\_\_ or 5 days\_\_\_\_

My preferred schedule of days is: (we will do our best to accommodate)

Monday  Tuesday  Wednesday  Thursday  Friday

---

Preschool 2: (3.4-4yrs): 8:40-11:40: 4 days\_\_\_\_ or 5 days\_\_\_\_

My preferred schedule of days is: (we will do our best to accommodate)

Monday  Tuesday  Wednesday  Thursday  Friday

---

Pre-K: (4-5yrs): 8:40-1:30 (M, T, Th, F), 8:40-11:40 (W): (5 days)

---

Transitional Kindergarten: (4.9-6 yrs) 8:40-1:30 (M, T, Th, F), 8:40-11:40 (W): (5 days)

---

**Please include a non-refundable \$600 deposit with this application to secure your child’s spot in the program. Forms and checks may be mailed in or dropped off with your child.**



Make checks payable to:

**WELLESLEY NURSERY SCHOOL IN THE HILLS** and return to:  
Wellesley Nursery School in the Hills  
207 Washington Street  
Wellesley, MA 02481

**Tuition Agreement:** I understand that the \$600 deposit accompanying this registration form is non-refundable and that all future tuition payments paid to the Wellesley Nursery School in the Hills are also non-refundable. If I choose to withdraw my child/children from this program, all outstanding tuition is still due unless the child’s space can be filled.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parents’ Names \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

