



Thornhill Nursery School & Kindergarten



140 Brooke Street, Thornhill, Ontario L4J 1Y9
(905) 889-4543

REGISTRATION FORM – Returning Families

Child's Name: _____ Date: _____

Program:
(Please use drop down menu to select program)

<u>Form</u>	<u>Signature</u>
Registration Form	
Parental Acknowledgment Form	
Field Trips/Special Events	
Multi Media Consent	
Anaphylactic Food Allergies	
Immunization Record	

With the above signatures, I authorize Thornhill Nursery School to carry forward the above forms for the duration of my child's enrolment at TNS&K.

Please indicate any changes to original Forms:

Rotessa Direct Payment Terms (September - May)

Total Outstanding (inc fees)	\$
Number of Installments	9
Amount per Installment	\$
Frequency of Installments	Monthly
First Payment Date	September 1 st , 20__

Deposit (non-refundable and currently dated applied to June's Tuition) made payable by

Cheque

Rotessa

Signature

For Office Use Only

Start Date:

End Date:

Deposit Paid: \$