

CARBONDALE NEW SCHOOL

NEW STUDENT

2018-2019 REGISTRATION FORM

STUDENT'S NAME: _____

Date of Birth: _____ AGE: _____ Grade Level at Fall Enrollment: _____ First Child: \$250

STUDENT'S NAME: _____

Date of Birth: _____ AGE: _____ Grade Level at Fall Enrollment: _____ Add'l Children: \$100 ea.

PARENT/GUARDIAN NAME: _____

ADDRESS: _____

EMAIL ADDRESS: _____

HOME PHONE _____

CELL PHONES _____

A \$250 registration fee must accompany this form. The entire fee is non-refundable if the child does not attend CNS.

\$200 is refundable and will be applied to the final 2018-2019 May tuition invoice.

Each additional child is \$100, which will also be applied to the final 2018-2019 May tuition invoice.

(parent signature)

(date)

If you were referred to CNS by another family, please let us know. Families who refer others receive \$150 off their 2018-2019 tuition!

Our family was referred by: _____

Students will be assigned to classrooms when registration form and payment is received.

In the event the classroom is full, applicants will be advised and placed on a waiting list for that class.

When openings occur, students will be admitted based on the date of registration.

Enrollment is only guaranteed upon receipt of registration form and registration fee.

How did you hear about us? _____