

San Anselmo Co-Operative Nursery School
Application for Admission

NEW admission age requirements:
2011 must be 3 by 10/1 of the year
2012 and beyond must be 3 by 9/1 of the year

Applying for fall of year _____
Applicant is (check one):
Alumni _____
Sibling _____
New _____

Parent(s): _____ & _____

Address: _____
(Street, City, Zip)

Mailing address (if different): _____

Home Phone Number: _____ Cell Phone: _____

E-mail: _____

Child's name: _____ Circle one
Male or Female Birthdate: ___/___/___

How did you hear about the coop? _____

I agree to:

1. Spend the required number of hours on an assigned day each week participating in the observation and supervision of the children.
2. Attend the scheduled evening meetings (one Business Meeting per month plus four Parent Education Meetings per school year).
3. Secure a paid parent or substitute parent when absence is necessary and pay back the work day within one month.
4. Present a negative tuberculin report on myself from the Health Department or my physician.
5. Present the report of a physical examination of my child, including a record of his/her vaccinations and immunizations.
6. Abide by transportation and parking regulations.
7. Contribute a minimum of eight (8) hours for maintenance and six (6) hours for housekeeping per year.
8. Accept responsibility for a job designed to facilitate the operation of the school.
9. Provide three Projects for the children and lead one Circle Time during the school year.
10. Be "on-call" as an Emergency Parent approximately once a month.
11. Ensure that my child is at least 2 years and 11 months old on the first day of school and is toilet-trained.
12. Abide by the San Anselmo Co-Operative Nursery School bylaws.
13. Participate in all fundraising events, including the Scrip Program.
14. Pay a regular monthly tuition on the date due whether my child is able to attend or not.
15. Pay a \$50 non-refundable application fee. (Please enclose with application to ensure your spot on the Wait List.
The fee is \$35 for returning families. If this fee creates a financial hardship, please let the Membership Chairperson know.)

I have read and agree with the conditions stated here and in the school brochure.

Parent Signature

Date

Membership Chairperson

Date

Please return to:

Membership Chair
24 Myrtle Lane
San Anselmo, CA 94960
415-454-5308
www.sananselmoco-op.org

Check#