16870 Murphy Avenue Morgan Hill, CA 95037 Mailing Address P.O. BOX 607 Morgan Hill, CA 95038 408-779-4515 www.mhpcns.com



## 2025-2026

# **Participant Enrollment Form**

| Date:  |  |            |                   |                 |                        |           |  |
|--|--|------------|-------------------|-----------------|------------------------|-----------|--|
| Child's Name:  | Birthdate:                                     |            | Age (by 9/2/25    |                 | 5)                     | )         |  |
| Home Address:  |  | City:      |                   | State:          | Zip:                   | _         |  |
| Parent/Guardian Name:  | Occupation:                                    |            |                   |                 |                        |           |  |
| Home Address:  |  | City:      |                   | State:_         | Zip:                   | _         |  |
| (If different from above) Phone: (c)                             | Fmail Address:                                 |            |                   |                 |                        |           |  |
| Parent/Guardian Name:  |  |            |                   |                 |                        |           |  |
|  |  |            | _                 |                 |                        |           |  |
| Home Address:(If different from above)                           |  | _City:     |                   | State:          | Z1p:                   |           |  |
| Phone:(c)  | EmailAddress:                                  |            |                   |                 |                        |           |  |
| 1. Please check the session for w                                | hich you are registering:                      |            |                   |                 |                        |           |  |
| CLASS **   | DAYS   |            | TIME              |                 | <b>TUITION</b>         |           |  |
| 2-3 Yrs.(2 days) **Child must be age 2 by <b>THEIR first day</b> | Tues & Thurs                                   |            | 8:30 am - 11:0    | 0 am            | \$ 285.00 monthl       | У         |  |
| 3-4 Yrs.(3 days)   |  |            | 8:30 am – 11:0    | 00 am           | \$ 350.00 monthl       | V         |  |
| **3-4 Year Olds - 3 Days - Child must b                          | ·  |            |                   |                 | ·                      | <i>3</i>  |  |
| Pre-K (4 days)   |  |            | 11:15 pm - 2:1    | 5 pm            | \$ 440.00 monthl       | y         |  |
| Pre K - Child must be age 4 by <b>Decemb</b>                     |  |            | 00 135 100 5      | N               |                        |           |  |
| We are evaluating moving toward                                  |  |            |                   |                 | •                      |           |  |
| Updates will be sent out to enrolle                              | u families as information be                   | econnes a  | ivanabie regard   | ing the chang   | ge.                    |           |  |
| 2. What are your hobbies?  |  |            |                   |                 |                        |           |  |
| ·  |  |            |                   |                 |                        |           |  |
| 3. What special talents do you or y                              | our spouse have? (i.e. sewing.                 | , painting | g, carpentry, wri | ting, etc.)     |                        |           |  |
|  |  |            |                   |                 |                        |           |  |
|  |  |            |                   |                 |                        |           |  |
| 4. Has a member of your immediat                                 | e family attended the Morgan                   | Hill Par   | rent Child Nurse  | ry School? If s | so, indicate the child | l's name, |  |
| class, and year attended.  |  |            |                   |                 |                        |           |  |
|  |  |            |                   |                 |                        |           |  |
| 5. Have you served as an officer for                             | an organization or club? Plea                  | ise speci  | fv:               |                 |                        |           |  |
| 2. 114.0 you served us an emeer for                              | un organization of <b>via</b> e, 11 <b>0</b> a | or oper    | - 5 .             |                 |                        |           |  |
| 6. How did you hear about us?                                    | Preschool Info NightFlye                       | rFri       | endWebsite        | Other (Spe      | ecify:                 | )         |  |
|  |  |            |                   |                 |                        |           |  |
| Please return your completed en                                  |  |            |                   |                 |                        | •         |  |
| child's place in the class. Cl                                   | hecks should be made payab                     | ole to M   | HPCNS. Venmo      | o- @MHPCNS      | S-1 Zelle- Info@ml     | pcns.com  |  |
| Dorant Cia   | notura   |            |                   |                 |                        |           |  |
| Faicht Sig   | nature:  |            |                   |                 | <del></del>            |           |  |

MHPCNS does not discriminate on the basis of race, color, national or ethnic origin in administration of our education policies, admission policies, scholarship and loan programs and athletic and other school administered programs.

#### PLEASE KEEP THIS PAGE FOR YOUR REFERENCE

You may return the enrollment form/admissions packets in person at the school, by mail, email to <u>info@mhpcns.com</u> or at a summer school day.

# **Summer Meet-Ups**

June 11, 2025 10AM -12PM Diana Park Morgan Hill

**July 9, 2025** 10AM-12PM Diana Park Morgan Hill (ADMISSIONS PACKETS AND MATERIALS FEE DUE)

August 20, 2025 10AM-12PM MHPCNS Play Yard

\*\*We use email to contact our member families. Please add <a href="mailto:info@mhpcns.com">info@mhpcns.com</a>
to your accepted addresses to avoid SPAM blockers. \*\*

| Due now                     | Enrollment Form and Enrollment Fee              | \$100.00 per child   |  |
|-----------------------------|---|----------------------|--|
|                             | ** \$50 per child for continuing families**     |                      |  |
| Due by July 10, 2025        | One Time Material Fee (non-refundable)          | \$115.00 2-3s        |  |
|                             |   | \$150.00 3-4s        |  |
|                             |   | \$170.00 Pre-K       |  |
| Due by July 10, 2025        | Admissions packet (Emailed in June)             |                      |  |
|                             |   |                      |  |
| Due by Orientation          | Tax Deductible Administrative Fee               | \$ 100.00 per family |  |
| Prior to your child's first | Child's physician report, immunizations, and    |                      |  |
| day of school               | TB tests returned to director                   |                      |  |
| -                           | Health screening report for parent or caregiver |                      |  |
|                             | including current negative TB test              |                      |  |

### Responsibilities as a participating parent in the Morgan Hill Parent Child Nursery School are as follows:

- Classroom workdays, 1 day per week (buyout or "drop off" may be possible pending sufficient enrollment per class)
- Volunteer Hours (12 hours per year, per family)
- Parent Job or Committee assignment
- Monthly Tuition
- Mandatory Participation in Parent Education Meetings

Completion of parental responsibilities is mandatory, and is vital if we want our preschoolers to have a rewarding and enriching experience at MHPCNS.