

Mom's Morning Out Nursery School
Fonda Reformed Church
19-21 Broadway, P.O. Box 536, Fonda, NY 12068
Student Information for 2023/2024

Student's Name: _____ Date of Birth: ___/___/___ Age: _____

Student's Address: _____

Allergies/Medical Alerts: _____

Are there food/drinks that your child should avoid? _____

Please share any other pertinent information about your child here: _____

Names and ages of siblings: _____

*Parent 1 Name: _____ Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employer's Name & Address: _____

*Parent 2 Name: _____ Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employer's Name & Address: _____

*Or Guardian's Name: _____ Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employer's Name & Address: _____

Please list all persons, their relationship and phone numbers whom **you give permission to bring to or pick up your child** from Mom's Morning Out.

(Name) Phone)	(Relationship)	(Home Phone)	(Cell
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Person completing this application: _____

Date: _____

(Office Use Only)

Received : \$ _____ Cash or \$ _____ by Check # _____ on ___/___/___ from:

_____. Said amount is a deposit towards the September, 2023 tuition for the

Mom's Morning Out Nursery School Program and **is non- refundable once the student has been enrolled.**

Deposited: ___/___/___ by: _____ M.M.O. Teacher. Acceptance

letter mailed on ___/___/___.