



DEERFIELD COMMUNITY NURSERY SCHOOL REGISTRATION POLICY ACKNOWLEDGEMENT FORM

Dear Parents:

The attached Registration Policy has been made for your convenience. It is important that you read, understand and follow our policy.

We ask that you execute the bottom of this cover letter acknowledging that you have read and understand the policy and return it with your registration card and non-refundable registration fee of \$150 per child (\$40 per child per session for Time With Tots).

If you have any questions regarding its contents, please feel free to discuss it with the Registrar, the Director, or the Treasurer: Accounts Receivable.

Thank you for your cooperation.

DCNS Registration Policy Acknowledgement

I/We, being the parent/guardian of _____, have received, read and agree with the attached DCNS registration policy.

Print Parent(s) Name(s)

Signature

Date