Bethesda Nursery School

305 St. Ronan Street New Haven, Connecticut 06511

SUMMER SCHOOL CONTRACT

I am hereby enrolling my son/daughter	in the summer school program for
week(s). I understand that these da	ys/hours may not be decreased. They may be
increased, with appropriate tuition increase.	
Week 1 – M T W Th F 1pm (please cir. Week 2 – M T W Th F 1pm (please cir. Week 3 – M T W Th F 1pm (please cir. Week 4 – M T W Th F 1pm (please cir. Week 5 – M T W Th F 1pm (please cir. Week 6 – M T W Th F 1pm (please cir. Week 6 – M T W Th F 1pm (please cir.	rcle) M T W Th F 3pm (Please Circle) rcle) M T W Th F 3pm (Please Circle) rcle) M T W Th F 3pm (Please Circle) rcle) M T W Th F 3pm (Please Circle) rcle) M T W Th F 3pm (Please Circle)
	hed. YES NO (Please Circle) I give permission thood. These trips will be on foot only. (Parents away from school.) YES NO (Please Circle)
	creen and/or insect repellent for my child if upplied from home, labeled with child's name and e sunscreen in your child's backpack or cubby,
In case of emergency, I give my permission for Hospital, YHP, or other facility (Exparent, staff member or ambulance as the situate	Please circle). Child will be transported by the
	ling health form, on file by the first day of the Bethesda Nursery School and returned to one not be able to continue attending school unless
Please write any additional or qualifying comm	ents on the reverse side.
Signature	Date
` 1.	y - please retain)
I agree to pay tuition on time in order that my c	•
I give permission for my child to be photograph	
I give permission for the teachers to apply suns	creen or insect repellent brought from home.

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In 6 I
In case of emergency, I give my permission for my child to be taken to the following emergency
facility:
I have written the following additional and/or qualifying comments on the reverse side of the
school copy of the contract: