

2018-2019  
Application for Enrollment



267 Winter Street, Duxbury, MA 02332

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Berrybrook was created for all children and their families whatever their race, religion, cultural heritage, political beliefs, national origin, martial status, sexual orientation, disability, or toilet training status.

Full Name of Student: \_\_\_\_\_ Returning Family? \_\_\_\_\_

Preferred Name (if applicable): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(for example: Tommy for Thomas. This will be the name used for nametags, cubbies, class lists, etc.)

Age September 2018 \_\_\_\_\_ years \_\_\_\_\_ months Male \_\_\_\_\_ Female \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_ Parent 2 Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Town & Zip: \_\_\_\_\_ Town & Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Family Email Address: \_\_\_\_\_

Other Members of the Household: \_\_\_\_\_

Previous Group Experience: \_\_\_\_\_

**New Families:** How did you hear about Berrybrook? \_\_\_\_\_

Program Preference:    Beginners    2 Day AM    3 Day AM    4 Day PM    5 Day AM

*Every effort will be made to accommodate parent preference. However, Berrybrook reserves the right to make class placement based on the needs of the children and the composition of the group.*

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

A **non-refundable application fee of \$40.00** must accompany this application.

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Office use: Application Fee \_\_\_\_\_ Tuition Deposit \_\_\_\_\_