



Growth and Early Learning

152 Dogwood Avenue
Franklin Square, NY 11010
(516) 481-3585

Email: registration@growth-el.com

Registration Form

2025-2026 School Year

REGISTRATION BEGINS ON DECEMBER 1, 2024

A \$200 non-refundable registration fee is due the at time of registration.

Please check off which program you are enrolling in:

☐ 2-Year Old Program

☐ 3-Year Old Program

☐ 4-Year Old Program

Child's Information

<i>First Name:</i>		<i>Last Name:</i>	
<i>Date of Birth:</i>		<i>Gender:</i>	
<i>Home Address:</i>			
<i>City:</i>		<i>State:</i>	<i>Zip:</i>

Parent/Guardian Information:

☐ MOTHER ☐ FATHER ☐ GUARDIAN	
<i>First Name:</i>	
<i>Last Name:</i>	
<i>Occupation:</i>	
<i>Cell Phone:</i>	
<i>Email Address:</i>	
<i>Address (if different from home address):</i>	
<i>City:</i>	
<i>State:</i>	<i>Zip:</i>
<i>Does the child reside with you?</i> ☐ YES ☐ NO	

☐ MOTHER ☐ FATHER ☐ GUARDIAN	
<i>First Name:</i>	
<i>Last Name:</i>	
<i>Occupation:</i>	
<i>Cell Phone:</i>	
<i>Email Address:</i>	
<i>Address (if different from home address):</i>	
<i>City:</i>	
<i>State:</i>	<i>Zip:</i>
<i>Does the child reside with you?</i> ☐ YES ☐ NO	

Child's Medical Information:

<i>Doctor's Name:</i>	<i>Telephone:</i>
<i>Does your child have any known allergies?</i> ☐ Yes ☐ NO <i>If yes, please list them:</i>	
<i>Please list all medical concerns the staff should be aware of:</i>	
<i>Child's Development: please share any information that would help us understand your child better (fears, separation issues, etc.):</i>	
<i>Does your child receive services from early intervention or CPSE?</i> ☐ Yes ☐ NO <i>If yes, please specify:</i>	

Emergency Contact:

<i>First Name:</i>	<i>Last Name:</i>
<i>Relationship:</i>	<i>Cell Phone/Telephone:</i>

Names of Alternates Authorized to Pick Up Your Child:

Alternate #1	Alternate #2	Alternate #3
<i>First Name:</i>	<i>First Name:</i>	<i>First Name:</i>
<i>Last Name:</i>	<i>Last Name:</i>	<i>Last Name:</i>
<i>Relationship:</i>	<i>Relationship:</i>	<i>Relationship:</i>
<i>Cell Phone:</i>	<i>Cell Phone:</i>	<i>Cell Phone:</i>

Other Information:

<i>Child's Personality: Please tell us any information that would help us understand your child better (shy, bossy, talkative, quiet, etc.)</i>

<i>Please list everyone that lives in your home (including pets):</i>	
<i>Name:</i>	<i>Relationship:</i>
<i>Name:</i>	<i>Relationship:</i>
<i>Name:</i>	<i>Relationship:</i>
<i>Name:</i>	<i>Relationship:</i>
<i>Name:</i>	<i>Relationship:</i>
<i>Name:</i>	<i>Relationship:</i>
<i>Name:</i>	<i>Relationship:</i>

Tuition & Schedule

Yearly tuition - \$5,750

There are two options for payment of your yearly tuition - a lump sum, or monthly installments. Please note that Growth and Early Learning is a yearly program that runs for 10 months, it is not a month-by-month program. When you enroll your child, you are committing for the full 10 months. Please select your payment plan:

☐ Installments	☐ Lump Sum
Tuition is payable in 10 equal installments of \$575 a month. Tuition payments are due on the first of the month, beginning on August 15, 2025, and ending on May 15, 2026.	The tuition payment of \$5,750 is due on August 15, 2025.

Yearly Schedule

The first day of school is September 15, 2025, and the last day is June 11, 2026. Growth and Early Learning follows the Nassau County public school schedule. (A copy of the schedule will be provided at the beginning of the year.) The program runs four days a week, Monday through Thursday, for three hours daily, from 9:30 am to 12:30 pm.

Agreement:

☐ I understand that a \$200 non-refundable deposit is due at the time of registration.

Print Parent/Guardian Name

Signature Parent/Guardian

Date: _____

Please make your check payable to **Growth and Early Learning** and mailed to:
Growth and Early Learning
152 Dogwood Avenue
Franklin Square, NY 11010

Children are not things TO BE MOLDED, but are people TO BE unfolded.