



Fair Haven Day School

Student's Name: _____

Age as of Sept. 1, 2020: _____ / _____
Years Months

Session One

Registration fee \$25
 June 1st-26th

M/W/F

T/TH

5-Days

Session Two

Registration fee \$25
 June 29th- July 31st
 July 2nd and 4th: SCHOOL CLOSED

M/W/F

T/TH

5-Days

August Week

If you child is coming for the fall this week is included in your August tuition. If they are not coming for the fall each day is \$60 with a \$20 registration fee.

August 3rd-7th Which days will your child attend?

August 10th-14th: Closed for Fall Preparation

August 17th fall semester starts

If you wish to enroll your child in *extended hours*, please indicate which time(s) you desire:

Session 1

	7-9a	2-4p	4-6p
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Session 2

	7-9a	2-4p	4-6p
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Parent Signature _____

Date _____

Office Use Only	Application Rec'd	Date Enrolled	Reg. Pack Given	Reg. Pack Rec'd
	Class Enrolled	Registration Fee ck. #	Data A	Data B