



PLEASE RETURN COMPLETED APPLICATION, COPY OF BIRTH CERTIFICATE AND APPLICATION FEE* OF \$60 (indiv. or \$100/family) TO:

The Tree House, 1 East Oak Street, Basking Ridge, NJ 07920

Tree House requires that ALL children be immunized according to NJ Immunization Requirements. Proper documentation must be submitted prior to the start of school.

*Please note application fee is non-refundable.

TREE HOUSE APPLICATION

CHILD'S INFORMATION

Date of Application _____ School Year _____ Child's Date of Birth _____

Student's Name _____ Male Female

FIRST

MIDDLE

LAST

Address _____

STREET

CITY

STATE

ZIP

Preferred Email _____

Preferred Telephone No. _____

Have you had a child previously enrolled at The Tree House? Yes No

If yes, what years? _____

Are you a member of the Presbyterian Church in Basking Ridge? Yes No

How did you hear about The Tree House? _____

PARENTS'/GUARDIANS' INFORMATION

Name _____ Relationship _____

Cell # 1 _____

Employer Name _____ Work # _____

Name _____ Relationship _____

Cell # 2 _____ Email # 2 _____

Employer Name _____ Work # _____

Parent/Guardian Signature _____ Date _____

CLASS PREFERENCE (Please check appropriate boxes)

18 mos

2s

2 1/2s

3s

4s

4 Plus

Friday

M/W

T/Th Half

M/W/F Half

M-Th Half

M-F Half

T/Th

Full

M-Th

Full

M-F Full

Full

M-F

Flex