

TRINITY CHURCH DAY SCHOOL

12400 Manor Road
Glen Arm, Maryland 21057
410-592-7423

ADMISSION APPLICATION (2024-2025)

Child's Full Name: _____ Male _____ Female _____ Prefer to Not Answer _____

Prefers to be called: _____ Birthdate: _____

Home Address: _____ Phone: _____

_____ Zip Code: _____

Email address(es): _____

Parent 1 Full Name: Dr., Mr., Mrs., Ms. _____

Prefers to be called: _____ Primary Phone: _____

Employer: _____ Position: _____

Parent 2 Full Name: Dr., Mr., Mrs., Ms. _____

Prefers to be called: _____ Primary Phone: _____

Employer: _____ Position: _____

Child currently enrolled in Trinity Church Day School? Yes _____ No _____

Parent or Sibling previously enrolled in Trinity Church Day School? Yes _____ No _____

Active members of Trinity Episcopal Church? Yes _____ No _____

PLEASE MAKE A FIRST AND SECOND CHOICE FOR CLASS REGISTRATION.

Mark your choices with "1" and "2" to indicate priority. All children in the 3s, 4s, and K classes must be toilet trained.

- | | |
|-----------------------------------|---------------------------------------|
| _____ 1-day Infant Baby Sense | _____ 3 day 4s (M/W/F) A.M. only |
| _____ 1-day 2s Two & You | _____ 3 day 4s + 3 day Enrichment |
| _____ 2-day 2s (Tu/Th) Explorers | _____ 5 day 4s (M-F) A.M. only |
| _____ 3-day 2s (M/W/F) Explorers | _____ 5 day 4s + 3 day Enrichment |
| _____ 5-day 2s (Hybrid) Explorers | _____ Kindergarten + 3 day Enrichment |
| _____ 2-day 3s (Tu/Th) | _____ Kindergarten + 5 day Enrichment |
| _____ 3-day 3s (M/W/F) | |
| _____ 5-day 3s (M-F) | |

FINANCIAL POLICY

A \$50.00 non-refundable registration fee must accompany this form. Please make checks payable to:
TRINITY CHURCH DAY SCHOOL.

By signing below, it is assumed that the tuition costs for the year will be paid. It is the policy of Trinity Church Day School that a child be enrolled for the entire year. If a child is withdrawn from school during the year, any unpaid portion of the year's tuition must be paid. A more detailed policy will be attached to the Enrollment Agreement.

Date: _____ Parent's Signature: _____