



**Wonderland Co-Op Nursery School**  
**1915 Helderberg Avenue**  
**Schenectady, New York 12306**  
**518-355-8022**  
**[www.wonderlandnurseryschool.com](http://www.wonderlandnurseryschool.com)**

## **Welcome To Wonderland!**

The families at Wonderland take pride in the openness of our program and our ability to give our children the freedom and time to socialize. Our weekly activities range from special projects to group events organized by the teacher. Field trips are important and several are held during the course of the year. These outings prove to be interesting and educational to both children and parents alike. Please be aware, each parent is responsible for providing transportation for these events. We also encourage outdoor play, in our well equipped play area, whenever possible. At Wonderland, parties are held to celebrate special occasions during the year. In particular, your child's birthday is an event in which you are encouraged to bring a special snack as a birthday treat. We have found these festivities add excitement and enjoyment for our children.

Parent cooperation is essential for the running of our school. We employ our teacher and teaching assistants, but as a non-profit organization, we rely upon volunteer leadership and depend upon all parents to help operate the classes. Parents (grandparents or child caregivers) are scheduled to be "teacher's helper" approximately once every month or two. There are usually 4 to 5 helping days per parent throughout the year. During this day, it is your responsibility to provide the snack and beverage for the day. There are certain duties to perform (which are posted in the classroom) but most importantly, this is a time to relax, enjoy and involve yourself completely in the children's activities. This is an experience that all parents are not fortunate enough to have available to them.

In order to keep our school running smoothly and efficiently, parents are required to serve on a committee. These responsibilities are essential and must be taken seriously. Please know, requested "jobs" are accommodated as best as possible. Additionally, parents are required to attend the four school meetings. During these meetings, nursery school business is discussed, ideas are exchanged and new friends are made. In addition, guest speakers are invited to talk on subjects related to preschool. This is a very important part of the cooperative program. Finally, fundraising is an important part of our school budget. Each family is expected to contribute, through fundraising, each school year. We offer a variety of fundraising activities each year so that everyone has the opportunity to participate in and help us meet our yearly budget.

We hope your time spent at Wonderland will be enjoyable and will be the beginning of a long and eventful school experience for you and your child. Any questions about the above should be directed to the registrar, Jill Rash @ 355-8022.



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Class: \_\_\_\_\_

## Wonderland Nursery School Registration Form

Please return this form within 10 days to ensure your child's spot in the class.

Child's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Nickname (if any): \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_

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

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

City & State: \_\_\_\_\_

Zip: \_\_\_\_\_

Father's Name: \_\_\_\_\_

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

Place of Work: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

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

Mother's Name: \_\_\_\_\_

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

Place of Work: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

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

Marital Status (Please Circle):    Single    Married    Separated    Divorced    Widowed

If Separated or Divorced,

Who is the custodial parent? \_\_\_\_\_

Are you a party to a court order concerning the custody of your child? \_\_\_\_\_

**If so, please attach a copy of the court order.**

**If you are the legal guardian of the child, please provide the school with a copy of the court order.**

If your marital status changes during the school year, please notify the school.

Names and Ages of other children in the family: \_\_\_\_\_

Who will be responsible for dropping off/picking up your child? \_\_\_\_\_

**If someone other than the child's parent will be picking them up from school, a copy of his/her license will be required to be kept on record at the school.**

What do you want your child to gain from his/her nursery school experience?

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Are your child's toilet habits well fixed? \_\_\_\_\_

Does your child have any nervous habits or disturbing experiences which the teacher should be aware of? \_\_\_\_\_

**Any life changes the child experiences throughout the year should be reported to the teacher (for example: moving, birth of a sibling, death of a family member or pet, etc)**

Does your child have any allergies and what type? \_\_\_\_\_

Is your child currently receiving medical care for these allergies? \_\_\_\_\_

How severe is the allergy and what are the symptoms? \_\_\_\_\_

Does your child have an early awareness of the onset of an allergic reaction? \_\_\_\_\_

What treatment does your child usually require for an allergic reaction? \_\_\_\_\_

Has your child ever had a previous nursery school experience? If so, where?

Reason for leaving: \_\_\_\_\_

How were you referred to Wonderland? \_\_\_\_\_

Due to the high costs of our insurance premiums, our registration fee is as follows:

Non-refundable \$100.00 per child

The **NON REFUNDABLE Registration Fee** insures enrollment for the school year 2011- 2012

in the \_\_\_\_\_

Year (3 or 4)

Day (MWF, TTH, or 5day)

Time of Class(AM or PM)

This form is due back within 10 days of receipt. Please return other forms ASAP. If final registration papers\*\* are not completed and returned by June 3, 2011, my child may be removed from the class list and I will forfeit my registration fee.

I agree to the terms of this contract.

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Father's Signature

\*\*Final registrations papers include: Health Contract Form, Parent Contract, Participation Form and an Emergency Medical Consent Form.



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Dear Parents:

Welcome to Wonderland Nursery School!

Enclosed are additional registration papers. The following must be **COMPLETED & RETURNED** by June 3rd to ensure your child's enrollment. Please return to Jill Rash ASAP.

1. Parent contract
2. One and ½ months tuition (first and last month)
3. Participation & Committee Schedule form
4. Emergency Contact & Consent form
5. School Release Form
6. Health Records form (to be completed by a physician) – This form must be returned prior to the start of school.

All immunization shots must be completed. Polio, DTap, Measles, Mumps, Rubella, MMR HIB and Varicella are required by state law. Records of these must be supplied or your child will not be allowed to start school.

In compliance with New York State, Department of Health (NYSDOH) and Schenectady County Public Health Services (SCPHS), Wonderland now strongly recommends that your child be tested for lead. This can be done at your pediatrician's office or at the county's clinic at 600 Franklin Street, Room 106, Schenectady, New York 12305. Call 346-2187 for a date and time. The results of this test will not interfere with your child's admission to school. This recommendation is in compliance with the state's guidelines and for your child's health. Please note space on health form for the date and results of tests.

A letter will be sent to you this summer informing you of the date of the first parent meeting, as well as the classroom supplies due on that night.

Please make all checks payable to Wonderland Nursery School. All forms, checks and questions should be directed to me at: 1915 Helderberg Ave, Schenectady NY 12306, or put in my mailbox at school.

Thank you very much for your time.

Sincerely,  
Jill Rash  
Registrar



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Class \_\_\_\_\_

## Parent Contract

We\* wish to enroll our child \_\_\_\_\_ in Wonderland Nursery School for the 2011 – 2012 school year. We understand that this is a cooperative school administered by the parents of the enrolled children with a professional teacher being responsible for the children’s program. We understand that the school is in session for four (4) year olds with classes from 9:00 AM to 11:30 AM on Monday, Wednesday and Friday or 12:00 PM to 2:30 PM on Monday through Friday. (The pm class includes both the MWF class and the 5 day class.) Three (3) year old classes are held from 9:00 AM to 11:00 AM on Tuesday and Thursday. The sessions will run from September through the first half of June according to the Mohonasen School calendar. Each class is capped at 20 students.

We are willing to join this organization and fulfill the duties thereof:

1. We will attend all four (4) parent meetings – dates to be announced.
2. We will act as helping parents as required and will provide appropriate snacks for the children on that day. See other side for “Non-participating Parent” option.
3. We will serve on the committee we are assigned to at the beginning of the school year.
4. **We will participate in all fundraising activities and raise a minimum profit of \$125.00 (2 and 3 day class) or \$135.00 (5 day class) for Wonderland. If this minimum is not met, we will provide monetary compensation equal to the difference in order to meet the amount noted in the yearly school budget. There is also a buyout plan if you choose to opt out and pay up front.**
5. We will help during the scheduled cleaning of the school. A \$25 cleaning deposit will be given, which will be refunded from our tuition upon completion of our scheduled cleaning date.
6. We will provide the requested classroom supplies to be announced in a letter to follow.
7. We will provide transportation for our child and will be available to drive our child on educational field trips arranged for the class.
8. We agree to pay the non-refundable Registration Fee of \$100 (if not already paid), the refundable \$25 cleaning deposit, and the enrollment fee of \$\_\_\_\_\_ to cover September and ½ June tuition. (Enrollment fee is \$150 for 2-day class, \$187.50 for 3-day class and \$292.50 for 5-day class.)
9. We also agree to pay the monthly tuition of \$\_\_\_\_\_ one month in advance due on the first (1<sup>st</sup>) of each month (October tuition is due on September 1<sup>st</sup>), payable by the tenth (10<sup>th</sup>). A \$5.00 late fee will be charged if payment is received after the extension day. If an account becomes more than two months behind, that child may be asked to leave the school to make room for children on the waiting list. Legal action will be taken for delinquent accounts not being paid.
10. We would like to choose the “Non-Participating Class Parent” Option. Yes\_\_\_\_\_ No\_\_\_\_\_ See other side for “Non-participating Parent” option.

Total amount due: \$ \_\_\_\_\_ (Please pay any unpaid balance from #8 above.)

\_\_\_\_\_  
Signature of Mother

\_\_\_\_\_  
Signature of Father

Date: \_\_\_\_\_

Date: \_\_\_\_\_



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## Emergency Contact & Consent Form

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Home Phone: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Parents/Guardian Names: \_\_\_\_\_

Address (if different): \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother - Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father - Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_ @ \_\_\_\_\_

In the event of an emergency and parent/guardian is not available, contact: (Name / Relationship)

1. \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

2. \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

3. \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Doctor's name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Hospital release: I give my consent to the physician to do what is deemed necessary to ensure the safety of my child.

\_\_\_\_\_  
Signature of Mother

\_\_\_\_\_  
Signature of Father



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Health Records - TO BE COMPLETED BY PHYSICIAN

\*\*\* PHYSICAL MUST BE WITHIN SIX MONTHS PRIOR TO THE FIRST DAY OF SCHOOL \*\*\*

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

1. Are there any specific medical problems, allergies, conditions requiring special attention, etc. that Wonderland School should be aware of?

Yes \_\_\_\_\_ No \_\_\_\_\_

a. If Yes, please specify: \_\_\_\_\_

Three horizontal lines for specifying medical details.

2. Height: \_\_\_\_\_

3. Weight: \_\_\_\_\_

4. Immunizations (Include all dates - Month/Day/Year)

DPT/Dtap \_\_\_\_\_

HIB \_\_\_\_\_

POLIO \_\_\_\_\_

HEP B \_\_\_\_\_

MEASLES #1 \_\_\_\_\_ MEASLES #2 \_\_\_\_\_

MUMPS \_\_\_\_\_ RUBELLA \_\_\_\_\_

TUBERCULIN TEST (Optional) \_\_\_\_\_ Results: \_\_\_\_\_

LEAD TEST \_\_\_\_\_ Results: \_\_\_\_\_

Signature of Physician \_\_\_\_\_

Date \_\_\_\_\_



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## **Committee Duties**

**Accu Cut Machine/Letterbook** - In charge of putting letter books together for 4 year olds. Also use die cut machine for projects.

**Book Orders** - Organize, collect and distribute book orders once a month.

**Bulletin Board** - Set up bulletin board to coordinate with seasons and holidays. Post calendars, notices and removal of outdated material.

**Class Parent** - Act as a guide for new parents. Help children during Holiday Secret Shop. Organize children's parties. Arrange for food at school picnic and four year old graduation.

**Duplicating** - Copy newsletter for each class plus other forms as needed.

**Equipment** - Maintain and repair all inside and outside equipment/toys.

**Fall Fest/Night Activities Committee** - Responsible for the set up/clean up and refreshments at parents meeting and open house. Set up/clean up at Fall Fest and any other Night Activities planned throughout the school year. Also help with graduation.

**Financial Representative** - Collect and deposit payment for monthly tuition. Accept check or money orders only. **DO NOT ACCEPT CASH**

**Fundraising** - Distribution of fundraising items and help with Spring Auction Event.

**Housekeeping** - Clean and straighten up school once a week. Clean table surfaces, paint easel, wastebaskets and storeroom weekly. Thoroughly wash equipment twice a year.

**Lending Library** - Maintain and keep organized the classroom lending library.

**Paper cutting** - Cut projects for class. Teacher will provide a list of projects each month.

**Phone/Email** - Notify parents of cancellations, special occasions and other school related information.

**Scheduling** - Schedule "Helping Parent" rotation list for parents to follow. Submit schedule to secretary by designated date and after approval by secretary, copy and distribute to class.

**Sewing/Laundry** - Replenish and launder doll clothes and bedding in the doll corner, rugs, smocks, mat covers and dress up clothes. It is helpful to know basic sewing and have a sewing machine.

**Sign** - Maintain the School Sign at the entrance of the parking lot, changing the message as necessary.

**Substitute Teacher** - Fill in as Teacher and/or Teacher Aide during absences. Must be available during your child's class time to select this choice.

**Yearbook** - Create Memory Book for students. This is distributed in June.





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## Parent Participation & Committee Schedule

Child's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

**School Cleaning Schedule** – Parents are responsible to attend one of the five school cleanings per year. Cleanings are usually held after school from approximately 6:15 to 7:15. Cleaning dates will be sent over the summer.

**Committee Schedule** - This is your school. All parents contribute to its' success by serving on committees and being available for special projects. Please check committee preference indicating your first, second, third, etc., choice. **PLEASE COMPLETE ALL BLANKS.** Committee jobs are appointed on the first-come, first-serve basis. The number in parenthesis ( ) indicates the number of people we need for each job. (See other side for descriptions of each job.)

- |  |                             |
|--|-----------------------------|
| Fall Fest/Night Activities Committee _____ | Bulletin Board _____        |
| Book Orders _____                          | Phone/Email Committee _____ |
| Equipment _____                            | Paper Cutters _____         |
| Yearbook _____                             | Accu Cut _____              |
| Housekeeping _____                         | Substitute Teachers _____   |
| Sewing/Laundry _____                       | Financial Reps _____        |
| Class Parent _____                         | Scheduling _____            |
| Duplicating _____                          | Fundraising _____           |
| Maintain the School Sign _____             | Lending Library _____       |

- Do you: \_\_\_\_\_ Own/have access to a computer?  
 \_\_\_\_\_ Play a musical instrument? If so, which one?  
 \_\_\_\_\_ Sew? Specialty?  
 \_\_\_\_\_ Repair furniture or toys?  
 \_\_\_\_\_ Do special refinishing or painting jobs?
- Do you have: \_\_\_\_\_ A sewing machine?  
 \_\_\_\_\_ A workshop?  
 \_\_\_\_\_ Access to a discount? If so, where? \_\_\_\_\_

Do either of you have any other abilities or information that you would like to contribute to our school?

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Would you be willing to share any of your hobbies with children of our school? If yes, please list your hobbies.

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Organizations that mother/father are active in.

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Is the child enrolled in Wonderland active in any other organized activities?

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Please suggest guest speakers for our parent meetings.

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## **Non Participating Classroom Parent**

During the 2011– 2012 school year, Wonderland Co-Op Nursery will extend a “**non-participating classroom parent**” option for all families. If you choose, you may elect to be a “non-participating classroom parent” for an additional fee of \$20.00 per month. A family is committed to this option for the entire school year and cannot “select” the months they may want to “opt out” of being helping parent. Your child will remain in the class rotation as the “Number One Child” and you will continue to be responsible for providing a snack and beverage on that day. This option will not create an extra need for those parents who choose not to participate. On these days, the 3 year old class will have the teacher, the assistant and one parent present while the 4 year old class will have the teacher and the assistant present. **All other school responsibilities are required for the family choosing this option (e.g. committee responsibilities, school cleanings, fundraising, field trip transportation, etc).**

Finally, please know that if you choose this option, you are always welcome to help in the classroom on the day your child is “Number One” if your schedule permits. If you have additional questions, please contact the registrar.



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## **Wonderland Nursery School Release Form**

My child \_\_\_\_\_ has my permission to leave Wonderland Cooperative Nursery School only with the following people. I understand that my child will not be released to anyone whose name is not included on this list. If there are any changes/updates, it is my responsibility to notify the teacher.

<b>Name</b>	<b>Relationship</b>

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_