



# Summer 2024

2801 Cheverly Avenue, Cheverly, Maryland 20785  
301-232-9150 | [WDN@cheverlyumc.org](mailto:WDN@cheverlyumc.org)

Return completed form directly to the CWDN office, or email to [WDN@cheverlyumc.org](mailto:WDN@cheverlyumc.org).  
Upon receipt of this form, you will receive an email with a link to a full Registration Packet with forms for signatures.

### CHILD'S INFORMATION (Please print clearly)

Child's Full Name: \_\_\_\_\_ Gender:  F  M

Preferred Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Child is potty trained:  Yes  No  
month day year

Home Address: \_\_\_\_\_  
Number & Street Name City State Zip Code

Languages spoken in home: \_\_\_\_\_

Has your child attended nursery, preschool, or childcare before?  No  Yes

If Yes, where? \_\_\_\_\_

Does your child have any allergies, asthma, seizures, or chronic illness?  No  Yes

If Yes, please describe: \_\_\_\_\_

Are medications needed for this condition?  No  Yes

Does your child require a nut-free (or other food allergen) environment?  No  Yes

At CWDN we strive to create an inclusive and supportive environment for all children. To ensure that we can provide the best possible care and assistance, we kindly ask if there is any specific needs or considerations regarding your child's health or development that you would like us to be aware of?

Does your child have an IEP or a 504 plan?  No  Yes (If yes, please attach documents)

**A nonrefundable Registration Fee of \$150 is due with application for all students.**

If applying online you will receive an emailed invoice for the Registration Fee. (Registration Fee for both Fall AND Summer is \$250)

A 10% Sibling Discount is applied to families with more than one student. Please complete separate application for each child.

**New Students only, a Birth Certificate and Immunization Records are also due with application.**

### Summer Sessions to attend:

- Session I June 20-26, 2024
- Session II June 27-July 6, 2024
- ALL SESSIONS  Session III July 8-12, 2024
- Session IV July 15-19, 2024
- Session V July 22-26, 2024
- Session VI July 29-August 2, 2024

### Number of Days per week to attend.

(choose 1)>  5 days, M-F  3 days, M-W  2 days, Th-F

### Length of Day to Attend:

(choose 1)>  Full-day, 8a-3:30p  Half-day, 8a-12p

**AfterCare needed**, available to Full-day Students ONLY: 3:30-6p.

For New Applicants ONLY:

	PARENT/GUARDIAN 1	PARENT/GUARDIAN 2
Full Legal Name:		
Relationship to Child:		
Cell Phone:		
Occupation:		
Employer:		
Work Phone:		
E-mail Address:		

Status of Parents: ( ) Married ( ) Single ( ) Divorced ( ) Widowed ( ) Separated

Applicant lives with: \_\_\_\_\_