



# WESTCHESTER AREA SCHOOL

456 Webster Avenue, New Rochelle, NY 10801



## EARLY RE-REGISTRATION FORM

Early registration fee for the year 2021-2022 is \$238.00. Please promptly complete this form and return it to the office with your re-registration fee. The following rates will apply based on the date your re-application form is received:

**Re-Registration Fee is due by May 28, 2021. After June 1<sup>st</sup>, 2021, the registration fee increases to \$293.00.**

**Early registration is necessary to make appropriate plans for the next school year.**

### NAME/S OF STUDENTS ATTENDING W.A.S.:

- 1. \_\_\_\_\_ PRESENT GRADE: \_\_\_\_\_
- 2. \_\_\_\_\_ PRESENT GRADE: \_\_\_\_\_
- 3. \_\_\_\_\_ PRESENT GRADE: \_\_\_\_\_

TOTAL AMOUNT PAYABLE TO SCHOOL: \$ \_\_\_\_\_ X \_\_\_\_\_ (number of children) = \$ \_\_\_\_\_  
**Please make check payable to: Westchester Area School**

### PARENT'S NAME(S):

MOTHER: \_\_\_\_\_ Phone#H. \_\_\_\_\_ W. \_\_\_\_\_

\*ADDRESS: \_\_\_\_\_

FATHER: \_\_\_\_\_ Phone#H. \_\_\_\_\_ W. \_\_\_\_\_

\*ADDRESS: \_\_\_\_\_

***\*DID YOUR ADDRESS CHANGE FROM LAST SCHOOL YEAR? NO { } YES { }***

Do you have other elementary age children in your home? NO { } YES { }

Will they be attending this school next year? NO { } YES { }

NOTE: 5% discount for the second child, 10% discount for the third child.

### LIST THE NAME/S OF ADDITIONAL CHILDREN WHO WILL BE REGISTERED:

- 1. \_\_\_\_\_ PRESENT GRADE \_\_\_\_\_
- 2. \_\_\_\_\_ PRESENT GRADE \_\_\_\_\_

Please list the names and phone numbers of anyone who may be interested in enrolling their child/ren. For each child you recommend that is registered for a full year at Westchester Area School you will receive a 5% off your child's tuition.

- 1. \_\_\_\_\_ PHONE# \_\_\_\_\_
- 2. \_\_\_\_\_ PHONE# \_\_\_\_\_
- 3. \_\_\_\_\_ PHONE# \_\_\_\_\_

My child/ren and I (parent/guardian) do agree to abide by the rules and regulations of Westchester Area School. I, the undersigned am responsible for paying all tuition and fees to Westchester Area School.

Signature of person completing this form: \_\_\_\_\_ Date: \_\_\_\_\_