

North Shore Early Childhood Center, Inc.
440 Round Hill Road
Roslyn Heights, NY 11577



Hours: 7:30am to 6:30pm

12 Month Program

6 Weeks to 5 years of age

Thank you for your inquiry regarding North Shore Early Childhood Center, Inc. The return of this application, along with a \$200. waiting list deposit will give you a position on the appropriate waiting list. We will do our best to accommodate you on your requested date, although all enrollment is subject to availability.

Please feel free to call us in the future with any changes you would like to make on this application. If you should decide that you are no longer interested in remaining on the list, a written request will enable us to return deposit in full. The deposit is fully refundable up until the point that you accept an offered spot, then the \$200. deposit is used towards our tuition assistance program. If you have any questions please call 516-365-7944.

North Shore Early Childhood Center, Inc. Waiting List

Paid: \$ _____

How did you hear of us? _____

Check Received on: _____

_____ Friend

Check Number: _____

_____ Ad

NSECC Signature: _____

_____ DSS

_____ Other _____

Name: _____

Home address: _____

Home Phone: _____

Cell Phone: _____

Phone (Other): _____

Employer: _____

Email: _____

Child's Name (first and Last): _____

Due Date or Birthdate: _____

The earliest I would be willing to begin paying tuition for an opening is: _____

List days that child care is needed: _____