



Level _____

Tarleton School

327 Waterloo Ave. • Berwyn, PA 19312 • Telephone — 610-644-5623

Name of Child _____
FIRST MIDDLE LAST NICKNAME

Date of Birth _____ Age Sept. 1 _____ yrs. _____ mos.

Home Address _____ Zip _____
STREET TOWN

Name of Father _____

Business or Profession _____ Bus. Tel. No. _____

Name of Mother _____ Home Tel. No. _____

Business or Profession _____ Bus. Tel. No. _____

Cell Nos. _____

Emergency Numbers: (Other Than Parent)

Name _____ Tel. No. _____

Name _____ Tel. No. _____

Physician's Name _____

Address _____

Tel. No. _____ Child's Allergies _____

Special Medical/Physical Needs _____

All tuition charges are payable in advance and are for the whole school year as set forth in the school folder. As a matter of convenience, they may be paid in two payments by August 15 and by February 1. **No refunds can be made for withdrawal, requested withdrawal, or for absences during the school year.** PUPILS CANNOT BE ADMITTED TO CLASSES UNTIL PAYMENT IS MADE.

A non-refundable Registration Fee of \$50.00 is payable with this registration.

Date of Registration _____ Signature _____

PLEASE SIGN BELOW:

I hereby certify that _____ is in good physical health and has been examined by a medial doctor within the last six months.

Parent's signature _____

I hereby give permission , in an emergency, for the best available physician to administer medical aid to _____, when the family or their personal doctor cannot be contacted.

Parent's signature _____