

Noah's Ark Nursery School
1 West Fourth Street
Quarryville, PA 17566
(717)-786-4919

Dear Parents,

Thank you for your interest in Noah's Ark Nursery School. Enclosed you will find the forms necessary for enrollment. To enroll your child, please complete the registration form and return it to Noah's Ark, as soon as possible. **Class rosters are filled on a first come, first serve basis.** Families with children currently enrolled are added to the roster first. All other registrations are dated when received and added to the rosters in that order. To make a class roster, the birth date and sex of the child are taken into consideration, as well as, years in school and possible teacher requests. Please note, however, when all factors are added together, **requests cannot always be accommodated. Each class will run contingent on reaching the minimum size noted below.** We have every confidence that each staff member will meet the needs of your child.

We offer the following classes:

Pre-Kindergarten - For children who are 4 years old by September 1. Tuition will be \$725.00 for the 2 day program, \$1,025.00 for the 3 day program. **Class size minimum is 10 & maximum is 16 children.**

Nursery School - For children who are 3 years old by September 1. Tuition will be \$725.00 for the 2 day program, and \$1,025.00 for the 3 day program. **Class size minimum is 8 & maximum is 12 children.**

Playgroup - For children who are 2 years old by September 1. The 1 day program will be \$475.00 and the 2 day program will be \$825.00. **Class size minimum is 5 & maximum is 8 children.**

Tuition can be paid in 8 monthly installments – September through April. Many tuition deductions can be earned in exchange for help needed (see back page) and limited scholarships are available.

All classes will meet in the morning from 9:00 a.m. - 11:30 a.m. School will begin after Labor Day, in September. **Additional information** about the **start of school** will be **sent** to you **in the beginning of August.** If you have any questions before that time, please feel free to call me at school 717-786-4919 or at my cell 717-330-3293.

Sincerely,

Cathy Peifer, Administrative Director
Noah's Ark Nursery School

2025-2026 Registration Form

Cash or Check # _____

Noah's Ark Nursery School
1 West Fourth Street
Quarryville, PA 17566

Amount Rec'd.: \$ _____

Date Rec'd.: _____

PLEASE NOTE: A NON-REFUNDABLE REGISTRATION FEE OF \$60.00 PER FAMILY MUST ACCOMPANY THIS FORM.

Name of Parents or Guardians – (PLEASE PRINT LEGIBLY ON THE ENTIRE FORM)

Child's Name ()
name child should recognize & write

Home Address City, State Zip

Child's Date of Birth (MM/DD/YEAR) Home Phone Daytime Cell Phone (if different)

Check if your child is:

____ Already attending Noah's Ark email address

____ Sibling now attending Noah's Ark

____ Going to nursery school for the 1st time

____ Does your child receive additional educational or behavioral support or have an IEP

____ If parents live in separate homes, please list additional address on back side of form

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\*\*PLEASE INDICATE YOUR 1<sup>ST</sup> AND 2<sup>ND</sup> CHOICE\*\*

(class times are 9:00 am – 11:30 am)

**Pre-Kindergarten** (Children who are 4 by September 1<sup>st</sup> – MUST have a minimum of 10 students to run each class)

M-W-F AM or T-Th AM  
(2 classes) (2 classes)

**Nursery School** (Children who are 3 by September 1<sup>st</sup> - MUST have a minimum of 8 students to run each class)

M-W-F AM or M-W AM or T-TH AM  
(1 class) (1 class) (2 classes)

**Playgroup** (Children who are 2 by September 1<sup>st</sup> - MUST have a minimum of 5 students to run each class)

T-TH AM or Mon AM and/or Wed AM  
(1 class) (1 class) check both (1 class)  
Mon AM & Wed AM  
If you would like your

DATE SENT \_\_\_\_\_

DATE RECEIVED \_\_\_\_\_

Additional address information:

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

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

City, State Zip: \_\_\_\_\_

Daytime phone Number: \_\_\_\_\_

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

The information listed above belongs to (please check one):

- ☐ Mother
- ☐ Father
- ☐ Grandparent
- ☐ Guardian

Noah's Ark Nursery School  
1 West Fourth Street  
Quarryville, Pa 17566  
Email: [noahsarkqville@gmail.com](mailto:noahsarkqville@gmail.com)  
PHONE (717)-786-4919

***Medical Information***

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|              |               |
|--------------|---------------|
| Child's Name | Date of Birth |
|--------------|---------------|

|                                                          |             |
|----------------------------------------------------------|-------------|
| <u>Immunizations</u>                                     | <u>Date</u> |
| DPT (diphtheria, pertussis, tetanus) 4 doses             | _____       |
| MMR (measles, mumps, rubella)                            | _____       |
| Varicella (chicken pox) or date of chicken pox infection | _____       |
| Polio Vaccine (IPV) 4 doses                              | _____       |
| Hepatitis B series of 3 doses                            | _____       |
| HIB 3 or 4 doses                                         | _____       |

At the discretion of you or your family doctor:

|          |       |
|----------|-------|
| TB test  | _____ |
| Pnemovax | _____ |

Allergies (please list)

Limitations to physical activity

Other special considerations

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|                       |         |
|-----------------------|---------|
| Physician's signature | Phone # |
|-----------------------|---------|

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Address

**PLEASE NOTE:** We will accept a copy of your doctor's print out in place of this form.  
The immunization form is due by 9/12/2025.

## HELPER SIGN UP SHEET

- Please keep in mind that tuition credits are given to parents who perform a variety of jobs necessary to the operation of our school. Parents willing to be a **reliable, dedicated** part of our team can sign up for jobs listed below. Positions are filled on a first come first serve basis, with consideration given to those with financial needs.
- Scholarships are also available through the mission giving of individuals. Contact Cathy Peifer for more information at school 717-786-4919 or cell 717-330-3293.

Classroom Helpers\*: A parent who works as an aid in a classroom one morning **EVERY** week for the entire school year will receive a deduction of \$300.00. Approximately 40 helpers are needed for the morning session.

Snack Helpers\*: Prepare snacks and drinks one morning **EVERY** week for the entire school year for all classes from a prepared menu before school. Clean up the leftovers, wash utensils, pitchers, etc... after school, for a deduction of \$175.00.  
5 people are needed for this job in the morning.

**\*Classroom & Snack Helpers will be asked to read the Safe Church policy, and complete the State mandated clearance certifications before starting as a helper.\***

Cleaning Persons: Three bathrooms, plus wash basins, door frames, and railings, disinfected and cleaned one day a week (5 people are needed) **OR** vacuum, dry mop, empty trash in 5 classrooms (5 people needed) for a deduction of \$300.00. Each person will be assigned a specific day to clean each week.

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Please indicate below if you are interested in helping and tell us when you are available.

Weekly Classroom Helper	_____	Day available	_____
Weekly Snack Helper	_____	Day available	_____
Weekly Cleaner	_____	Day available	_____

Parent /Guardian

Phone

Child's Name

My child will attend Noah's Ark: M T W Th F (circle all that apply)

PLEASE NOTE: You will be assigned a specific day each week to help and YOU will be expected to replace yourself if you are unable to help on your assigned day.