### CHILD'S INFORMATION

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<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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<tr>
<th>Age</th>
<th>Date of Birth (or Expected)</th>
<th>Gender</th>
<th>Nickname</th>
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Street Address

City, State, Zip

Telephone Number   Birth Place

### OFFICE USE ONLY

Date Rec’d  
VC Sib/C Comm

Prog & Yr

Prog & Yr

Prog & Yr

Prog & Yr

### PARENT / GUARDIAN INFORMATION

**Preferred Title:** Mr. Ms. Mrs. Miss Dr. (None)

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Street Address (if different from above)

City, State, Zip

Telephone Number

Email

### Names of other adults in home and relationship to child:

____________________________________________________

### Names of other children in home and ages:

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Has anyone in your family attended the ITC?  If so, who and when? 

Has anyone in your family attended Wimpfheimer?  If so, who and when? 

Is either parent a Vassar alumnus/ alumna?  Is either parent a student at Vassar? 

Is either parent employed by Vassar?  If yes, who? 

Program(s) of interest:  Full Time  Shared Time 

Are there any special circumstances we should know about?  (write on back if necessary) 

### How have you heard about Wimpfheimer Nursery School? (check all that apply)

- [ ] A Friend / Family Member
- [ ] Bardavon / Philharmonics Playbill
- [ ] Poughkeepsie Journal Advertisement
- [ ] Website
- [ ] Newspaper Article / “The Early Years” Column

Revised 3/21/06 JAR LPTP