



MOMMY & ME PROGRAM

The Madison Co-op offers a Mommy (or Daddy) & Me program for young children preparing for preschool. It is the perfect fit for parents looking for a program to help their toddler's transition from the informal home play setting to a more formal play group in a school atmosphere.

This program also allows for parents (or caregivers) and toddlers to make new friendships that will continue into the preschool years. Our fun, toddler friendly Co-op Play Gym will hosts the 1½ hour Mommy & Me Program. Directed and supervised by Ms. Kumi, a beloved Co-op teacher and alumni parent, each class will include music/singing, a simple craft, and plenty of playtime for kids and social time for parents. Parents may opt to bring a nut-free snack for their child each week.

Fall Session:	October 2 - November 13*	\$60 (6 weeks)
Winter Session:	January 8 - March 25	\$120 (12 weeks)
Spring Session:	April 1 - May 13**	\$60 (6 weeks)

Please note:

- *No class October 9 / **No class April 8
- Children must be under the age of 2½ at registration to qualify for the program.
- Tuition must be paid in full (via check or PayPal) with submission of this registration form. Tuition is nonrefundable.
- Due to a limited number of spaces, enrollment will be accepted on a first come, first served basis.
- Classes follow master school calendar for all closings.
- Each class will feature introductory circle time, an age appropriate craft and free play time with friends to allow caregivers a chance to socialize and observe their children in a social setting while having interactive fun with their child.
- No shoes allowed in gym, please wear comfy socks!
- All school policies will apply to this program.

For questions, please contact us at (973) 377-2501 or madcoopdirector@gmail.com

- PLEASE KEEP THIS PAGE FOR YOUR RECORDS -

Join for the Fun, Stay for the Community!

4 Madison Ave, Madison, NJ 07940 | Tel. 973-377-2501 | www.madisoncoop.org



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TOTAL: _____

Registration:

I am enrolling my child in the Mommy & Me program. I have read the requirements above (first page) for participation in the program.

Child's name: _____

Parent signature: _____

Date: _____

Address: _____

Cell phone #: _____ Email: _____

Payment:

- Checks should be made out to: "Madison Cooperative Nursery School"
- Return payments with registration form to: 4 Madison Ave., Madison, N.J. 07940
- Authorization to bill via: PayPal: OR Check Enclosed:

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- PLEASE SUBMIT THIS PAGE TO THE MADISON CO-OP -

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