



Telegraph Hill Cooperative Nursery School

555 Chestnut Street, San Francisco, CA 94133
415.421.3313
www.telhillcoop.org

Child's Photo



MEMBERSHIP APPLICATION

Child's Name _____ Sex _____ Date of Birth _____

Home Address (w/zip code) _____ Home Phone _____

Mother's Name _____ Occupation _____ Work Address _____ Work Phone _____

Father's Name _____ Occupation _____ Work Address _____ Work Phone _____

E-mail _____ Cell Phone(s) _____

Number of Children in Family _____ Ages _____ Expecting? _____

In daycare/nursery school/babysitter care? _____
If yes, where?

Any developmental /medical/behavioral issues? _____ If yes, please explain on back.
We do not discriminate based on this information and accept all children as long as we can provide a safe environment.

Please list any skills/interests you (parents) can contribute to the Co-op: _____

Continue on back if needed. A lack of skills will not affect your child's application. Skills include things you can share in the classroom (teaching experience, art, music, (including playing an instrument, photography, cooking, coaching, etc.) as well as skills that apply to our fundraiser, the San Francisco International Beer Festival (publicity, event planning, food prep/organization, bar/beer experience, marketing, accounting, people management, etc.)

Why Tel-Hi Co-op? _____

How did you hear about the Co-op? _____

Parent Signature _____ Date _____

We will place your child on our waiting list upon receipt of this form and the \$25.00 application fee. Please include your child's name in the memo portion of the check. Checks should be payable to Tel-Hi Co-op Nursery School.

For membership use:

Date received:

Toured on: