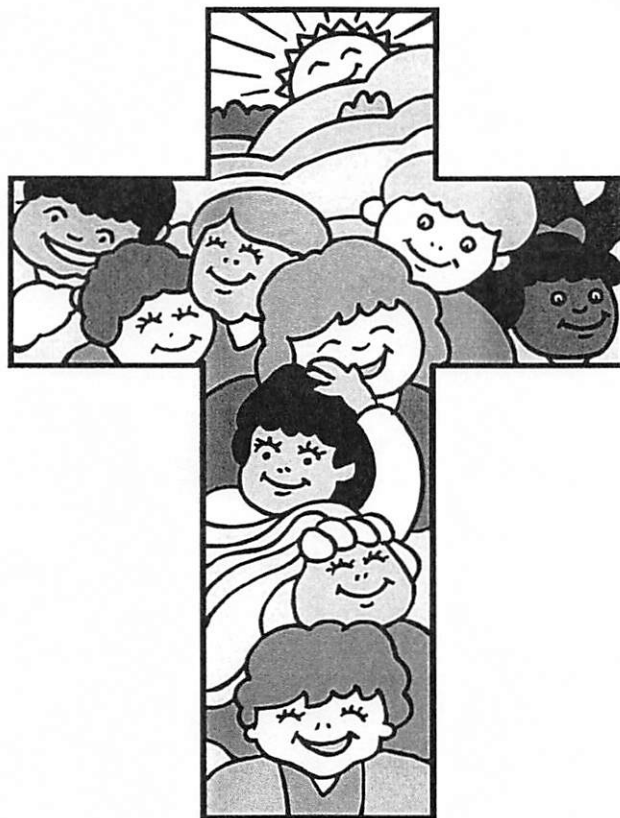


Messiah Lutheran Preschool

Please return this completed
Enrollment Application
2025-2026



14920 Hutchison Road
Tampa, FL 33625

License #: C 13HI0081

813 968-9534 ~ messiahpreschool.org

MESSIAH LUTHERAN CHURCH PRESCHOOL

2025-2026

Judy Patterson, Director

14920 Hutchison Road Tampa FL 33625 Phone: (813)968-9534
preschooldirector@messiahtampa.com

License #: C13HI0081

STATEMENT OF AGREEMENT

PARENT (OR LEGAL GUARDIAN) STATEMENT OF AGREEMENT

I UNDERSTAND THAT:

1. All requirements for admission (as stated in the enrollment packet and in the Parent Handbook) need to be met by school families.
2. There will be no refund of registration fee or supply fee. Tuition will be prorated if your child withdraws before the end of the month.
3. Payments are due the first week of each month and a \$10.00 late fee will be charged for each payment not received by the 5th day of the month.
4. All returned checks will be assessed a \$25.00 fee.
5. If my account(s) is not paid by 30 days from the due date, my child will be suspended from school and/or the Before/After School Care Program until the account(s) become current.

As a registrant at Messiah Lutheran Church Preschool, I have read and agree to support the policies, financial obligations and other procedures of the school as stated in this form, or as well as in the Parent's Handbook.

Parent's Signature (Legal Guardian)

Date

Messiah Lutheran Preschool Tuition Agreement

School Year: August 11, 2025 - May 29, 2026 (Preschool)

Child's Name: _____

Child's Birthday: _____

Please check the enrollment options for your child.

Selections may be changed with a 30-day written notice.

2 Day Preschool Tuition Options (Tuesday & Thursday)

- Non-refundable registration fee of \$100.00 is due upon application submission.
- Supply fee of \$180.00 is due with your child's first month's tuition.

<input type="radio"/>	Half Day Preschool	9:00 am - 12:00 noon	\$335.00/month (\$3,350.00/year)
<input type="radio"/>	Full Day Preschool	9:00 am - 3:00 pm	\$504.00/month (\$5,040.00/year)

2 Day Extended Care Options

<input type="radio"/>	Morning Care	8:00 am - 9:00 am	\$80.00/month (\$800.00/year)
<input type="radio"/>	Afternoon Care	3:00 pm - 5:00 pm	\$160.00/month (\$1,600.00/year)

3 Day Preschool Tuition Options (Monday, Wednesday & Friday)

- Non-refundable registration fee of \$100.00 is due upon application submission.
- Supply fee of \$180.00 is due with your child's first month's tuition.

<input type="radio"/>	Half Day Preschool	9:00 am - 12:00 noon	\$390.00/month (\$3,900.00/year)
<input type="radio"/>	Full Day Preschool	9:00 am - 3:00 pm	\$606.00/month (\$6,060.00/year)

3 Day Extended Care Options

<input type="radio"/>	Morning Care	8:00 am - 9:00 am	\$120.00/month (\$1,200.00/year)
<input type="radio"/>	Afternoon Care	3:00 pm - 5:00 pm	\$240.00/month (\$2,400.00/year)

5 Day Preschool Tuition Options (Monday - Friday)

- Non-refundable registration fee of \$100.00 is due upon application submission.
- Supply fee of \$225.00 is due with your child's first month's tuition.

<input type="radio"/>	Half Day Preschool	9:00 am - 12:00 noon	\$550.00/month (\$5,500.00/year)
<input type="radio"/>	Full Day Preschool	9:00 am - 3:00 pm	\$910.00/month (\$9,100.00/year)

3 Day Extended Care Options

<input type="radio"/>	Morning Care	8:00 am - 9:00 am	\$200.00/month (\$2,000.00/year)
<input type="radio"/>	Afternoon Care	3:00 pm - 5:00 pm	\$400.00/month (\$4,000.00/year)

Voluntary Pre-Kindergarten

- Registration fee: No cost to parents
- Certificate of Eligibility required from VPK
- Supplies: your child will receive a class supply list

<input type="radio"/>	Half Day Preschool	9:00 am - 12:00 noon	\$0 (FREE-State VPK Funded)
<input type="radio"/>	Full Day Preschool	9:00 am - 3:00 pm	VPK Funding + \$336.00/month

VPK Extended Care Options

- Non-refundable registration fee of \$100.00 is due upon application submission

<input type="radio"/>	Morning Care	8:00 am - 9:00 am	\$200.00/month (\$2,000.00/year)
<input type="radio"/>	Afternoon Care	3:00 pm - 5:00 pm	\$400.00/month (\$4,000.00/year)

Full Tuition Payment:

There is a 5% discount if annual tuition is paid in full by August 31st,

Siblings:

There is a 5% discount off the total monthly/annual tuition when more than one child from a family is registered in a tuition-based class.

Parent Signature: _____

Date: _____



State of Florida
Department of Children and Families

CHILD CARE APPLICATION FOR ENROLLMENT

Student Information: Date of Birth: _____ Sex: _____ Date of Enrollment: _____

Full Name: _____
Last First Middle Nickname

Child's Physical Address: _____

Primary Hours of Care: From: _____ To: _____

Days of the Week in Care: ☐ M ☐ T ☐ W ☐ Th ☐ F

Family Information: Child's Lives With: _____

Mother's Name: _____ Father's Name: _____

Address: _____ Address: _____

Home Phone: _____ Home Phone: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

Work Phone: _____ Cell: _____ Work Phone: _____ Cell: _____

Custody: ☐ Mother ☐ Father ☐ Both ☐ Other (specify): _____

Medical Information: I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: _____ Address: _____

Phone Number: _____

Doctor: _____ Address: _____

Phone Number: _____

Dentist: _____ Address: _____

Phone Number: _____

Hospital Preference: _____

Please list allergies, special medical or dietary needs, or other areas of concern:

Emergency Care Plan Instructions (if applicable):

Emergency Contacts: Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason, the custodial parent or legal guardian cannot be reached:

Name	Address	Work Phone	Home Phone
Name	Address	Work Phone	Home Phone
Name	Address	Work Phone	Home Phone
Name	Address	Work Phone	Home Phone

Helpful Information About Child:

- Sections 7.1 and 7.2 of the Child Care Facility Handbook require a current physical examination (Form 3040) and Immunization record (Form 680 or 681) within 30 days of enrollment.
- Section 7.3 of the Child Care Facility Handbook requires that parents receive a copy of the Child Care Facility Brochure entitled "Know Your Child Care Facility" (CF/PI 175-24) [also available on-line at <https://eds.myflfamilies.com/DCFFormsInternet/Search/OpenDCFForm.aspx?FormId=860>], or
- Section 8.3 of the Family Day Care Home/ Large Family Child Care Home Handbook requires that parent(s) receive a copy of the family day care home brochure entitled "Selecting A Family Day Care Home Provider" (CF/PI 175-28) [also available on-line at <https://eds.myflfamilies.com/DCFFormsInternet/Search/OpenDCFForm.aspx?FormId=841>].
- Section 2.8 of the Child Care Facility Handbook requires that parents are notified in writing of the disciplinary and expulsion policies used by the child care facility, or
- Section 2.3 of the Family Day Care Home/ Large Family Child Care Home Handbook requires that parents are notified in writing of the disciplinary and expulsion policies used by the family day care provider.

Your signature below indicates that you have received the above items and that the information on this enrollment form is complete and accurate. I hereby grant permission for the staff of this facility to have access to my child's records.

Signature of Parent/Guardian

Date

MESSIAH LUTHERAN PRESCHOOL

ENROLLMENT FORM

(please write neatly)

Child's Name: _____ Birth date _____ Age as of September 1st _____

Mother's Name: _____ Father's Name _____

Address: _____ City _____ Zip Code _____

Mother's Cell Phone: _____ Father's Cell Phone _____

Home Phone: _____

Preferred Email address: _____

Child lives with: Mother _____ Father _____ Both _____ Other _____

Other children in your home (Names, ages):

Can child speak clearly? _____ Language spoken at home: _____

Is child right- or left-handed? _____

Previous school or day care attended: _____

We like to celebrate Baptismal Birthdays during weekly Chapel. Please share with us:

Child's Baptismal Date: _____ Where: _____

Church Affiliation: _____

How did you hear about us: Website Facebook Returning Family Referral
(please circle) Referred by: _____

As the natural parent or guardian, I hereby waive and release any claim my child may have or we (parents or guardians) may have on his/her behalf for damages that he/she may sustain while participating in the activities of Messiah Lutheran Preschool. This waiver and release is in favor of the Officers, Directors, and Teachers of the Preschool and the many volunteer persons organizing and supervising Preschool activities. I understand that my medical insurance will be used as the primary insurance coverage for my child in case of injury and I will accept full responsibility for payment of any medical services rendered.

Parent/Legal Guardian Signature _____

Date _____

MESSIAH LUTHERAN PRESCHOOL

TEE SHIRTS

Dear Parents,

The preschool would like to provide each registered child a Messiah Lutheran Preschool tee shirt to wear on field trips and other special days.

Please fill out the form below and return it with your application.

Shirt Sizes Available

EXTRA SMALL (2-4)

SMALL (6-8)

MEDIUM (10-12)

LARGE (14-16)

Child's Name _____

Class(please circle) 2 year 3 year VPK

Shirt Size(please circle) XS S M L

MESSIAH LUTHERAN CHURCH PRESCHOOL

2025-2026

License #: C13HI0081

Parental Permission for Food Activities/Special Occasions

Students will need to bring a snack and water bottle each day. Please label your child's snack and water bottle with your child's name (first and last name).

Per Child Care Licensing regulations, we are required to announce in advance to our parents when we plan activities involving food in our classroom curriculum or if there are special occasions where parents will be sending in special snacks (i.e., birthdays, other parties or special days).

We will notify you in advance of any food we plan to serve in the classroom. In return, we ask if you are sending in a special snack that you tell us at least 48 hours in advance, so we can notify the other parents.

If your child has any special dietary needs or restrictions, we ask that you send in a separate snack for your child. We will notify you of the snacks to be served in advance of the event.

PLEASE COMPLETE THE FOLLOWING:

Yes/No My child is allowed to eat curriculum-based activity/snacks at summer camp.

Yes/No My child is allowed to eat special event snacks.

Yes/No My child is allowed to eat special snacks at classroom birthday parties.

Yes/No My child has food allergies or food restrictions so I will supply snacks for my child for special occasions/activities.

Child's name _____

Parent Signature: (Legal Guardian) _____

Date: _____

MESSIAH LUTHERAN CHURCH PRESCHOOL

2025-2026

License #: C13HI0081

DISCIPLINARY PRACTICES

Discipline helps children learn self-control and respect. We use Positive Guidance Strategies. This type of guidance encourages positive behavior through modeling, positive reinforcement, and the use of offering alternative activities to promote appropriate behavior. Our purpose is to help your child regulate his emotions and actions, not to stop him from expressing feelings and moods. When a child displays unacceptable behavior, the teacher will implement positive guidance strategies to support appropriate behavior. We help children of comparable size and ability to work out their own solutions. We assist the shy child to stand up for himself/herself and for the aggressive child to verbalize.

When a teacher determines a situation (such as kicking, biting, throwing objects, temper tantrums and similar disruptive behavior) needs a resolution the following steps will be taken:

- The teacher will talk to the child.
- The teacher will redirect and/or remove the child from the situation.
- If the behavior continues the child's parent will be contacted and a solution will be agreed upon.
- We reserve the right to remove the child from the program if the child's disruptive behavior continues despite parental conferences with the teacher and/or director.

No child will ever be punished physically, socially, or emotionally. Spanking or any other form of physical punishment is prohibited.

Child's name _____

Parent Signature: (Legal Guardian) _____

Date: _____

MESSIAH LUTHERAN CHURCH PRESCHOOL

2025-2026

License #: C13HI0081

Field Trip Release

As parents of _____, we agree that our child may go on Messiah Lutheran Preschool field trips during the school year. We further understand that the children will be properly chaperoned by representatives of the school.

Please check the option that applies to your child.

_____ We understand that our child may be transported in a private automobile and that this automobile is not under the control of Messiah Lutheran Preschool.

_____ We prefer to attend all outside field trips and will drive our child.

Parent Signature: (Legal Guardian) _____

Date: _____

MESSIAH LUTHERAN CHURCH PRESCHOOL

2025-2026

License #: C13H10081

Photography Release

I hereby give my consent that any photographs being taken of my child, _____, may be used by Messiah Lutheran Preschool for: (please check all that apply to your child)

_____ in-class projects

_____ Shared on Messiah Lutheran Preschool, Tampa's Facebook or Instagram Account

_____ the purposes of promoting Messiah Lutheran Preschool, such as the Preschool Website, the Preschool Brochure, and for other Preschool oriented activities.

Parent Signature: (Legal Guardian) _____

Date: _____

Messiah Lutheran Preschool is not responsible for any photographs taken by preschool families during special events.

MESSIAH LUTHERAN CHURCH PRESCHOOL

2025-2026

License #: C13HI0081

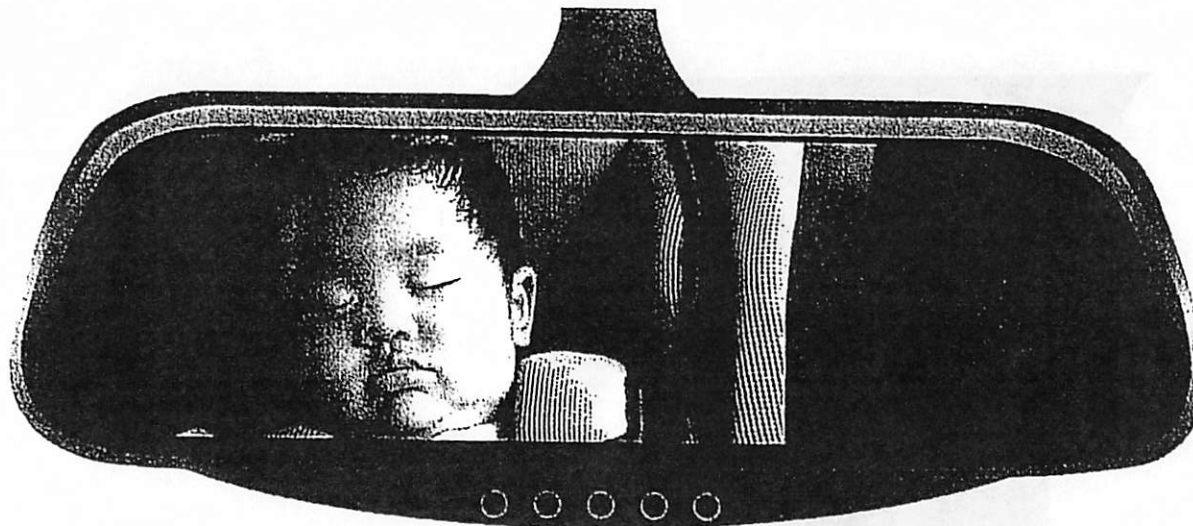
Waiver

As the natural parent or guardian, I hereby waive and release any claim my child may have or we (parents/guardians_ may have n his/her behalf for damages that he/she may sustain while participating in the activities of Messiah Lutheran Church Preschool. This waiver and release is in favor of the Officers, Directors and Teachers of Messiah Lutheran Church and Preschool and the many volunteer persons organizing and supervising activities. I understand that my medical insurance will be used as the primary insurance coverage for my child in case of injury and I will accept full responsibility for payment of any medical service rendered.

Child's name _____

Parent Signature: (Legal Guardian) _____

Date: _____

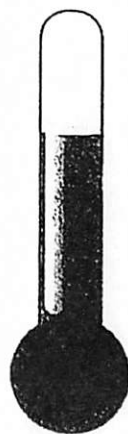


FACTS ABOUT HEATSTROKE:

It only takes a car 10 minutes to heat up 20 degrees and become deadly.

Even with a window cracked, the temperature inside a vehicle can cause heatstroke.

The body temperature of a child increases 3 to 5 times faster than an adult's body.



⚠️ PREVENTION TIPS:

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.



My signature below verifies receipt of the Distracted Adult brochure

Parent/Guardian:

Child's Name:

Date:

Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents*:

Name: _____

Child's Name: _____

Date Received: _____

Signature: _____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.

