

# CFUMC Preschool & Kingergarten



"Rooted in faith, growing in love"

**PLEASE COMPLETE THIS FORM TO REGISTER YOUR CHILD FOR THE  
2020/2021 SCHOOL YEAR. STUDENTS ARE ACCEPTED ON A FIRST-  
COME BASIS.**

Application Date \_\_\_\_\_

Child's Full Name \_\_\_\_\_ Date of birth \_\_\_\_\_

Preferred Name (if different) \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Church Membership/Affiliation \_\_\_\_\_

Does your child live with both parents? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, with whom does your child live \_\_\_\_\_

## **EMERGENCY INFORMATION:**

Mother's Name \_\_\_\_\_ Marital Status \_\_\_\_\_

Home Address (if different from above) \_\_\_\_\_

Home Phone (if different from above) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

**Father's Name** \_\_\_\_\_ Marital Status \_\_\_\_\_

Home Address (if different from above) \_\_\_\_\_

Home Phone (if different from above) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

**Guardian's Name** \_\_\_\_\_ Marital Status \_\_\_\_\_

Home Address (if different from above) \_\_\_\_\_

Home Phone (if different from above) \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

**INDIVIDUALS AUTHORIZED TO PICK UP MY CHILD:**

Check all that apply: Mother \_\_\_ Father \_\_\_ Other \_\_\_

If you checked other, list those individuals below.

1.Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to the child \_\_\_\_\_

If you cannot be reached, may we call this person in case of emergency? \_\_\_\_\_yes \_\_\_\_\_no

2.Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to the child \_\_\_\_\_

If you cannot be reached, may we call this person in case of emergency? \_\_\_\_\_yes \_\_\_\_\_no

3.Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to the child \_\_\_\_\_

If you cannot be reached, may we call this person in case of emergency? \_\_\_\_\_yes \_\_\_\_\_no

Please list individuals who **may not** pick up your child: \_\_\_\_\_

\_\_\_\_\_

**\*Any person unfamiliar to us will be required to show photo identification**

You have my permission to use my child's picture in printed or electronic media to benefit or promote the preschool. (Ex. church website, bulletin boards, preschool newsletter, preschool Facebook page)

( ) Yes ( ) No Signature \_\_\_\_\_

**MEDICAL INFORMATION:**

Please list medical conditions, including chronic health problems or allergies. **Please list all food allergies.**

\_\_\_\_\_  
\_\_\_\_\_

Is your child on daily medication? ( ) Yes ( ) No If yes, please list \_\_\_\_\_

Does your child have hearing or visual problems? If so, briefly explain \_\_\_\_\_

Has your child ever received an evaluation through Babies Can't Wait or the school system? \_\_\_\_\_

Does your child receive speech, occupational or physical therapy? \_\_\_\_\_

Child's Physician \_\_\_\_\_ Office Phone \_\_\_\_\_

Child's Dentist \_\_\_\_\_ Office Phone \_\_\_\_\_

**\*If an emergency contact cannot be reached, I authorize CFUMC Preschool to obtain treatment from the nearest doctor or emergency medical facility.**

**A copy of your child's current immunization form must be provided prior to the first day of school.**

CFUMC Preschool operates as a ministry of Clarkesville First United Methodist Church. Due to the hours of operation, the preschool program is exempt from licensure through the state of Georgia.

CFUMC Kindergarten is in the process of accreditation through the Georgia Accrediting Commission.

\_\_\_\_\_  
Signature of Parent or Guardian

**Preschool Fees & Tuition**

**Registration Fee:** \$100 - This fee reserves your child's space in a class and is due at the time of registration.

**Supply Fee:** \$50 due Jan. 1

**Graduation Fee:** \$10 due March 1 (Pre-K students only)

**Tuition (per month):**

- \$160 - 2 days per week
- \$190 - 3 days per week
- \$220 - 4 days per week
- \$250 - 5 days per week

**Kindergarten Fees & Tuition**

**Registration Fee:** \$75

**Curriculum Fee:** \$200

**Supply Fee:** \$100

**Yearly Tuition:** \$3200 or

\$320 per month

Yearly tuition paid in full in August will receive a 5% discount. Clarkesville First UMC Preschool & Kindergarten operates ten months per year (August - May). We have a fixed rate tuition. All fees and tuition paid are non-refundable.

**Please check your option for class and days:**

	<u>Class</u>	<u>Days</u>
___	Two Year Class	M, W, F
___	Two Year Class	Tu & Th
___	Three Year Class	M - T
___	Three Year Class	Tu - Th
___	Pre-K Class	M - F
___	Kindergarten Class	M - F

# **FOR OFFICE USE ONLY**

## **Preschool**

Registration Fee: Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_  
Check # \_\_\_\_\_ cash \_\_\_\_\_

Jan. Supply Fee: Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_  
Check # \_\_\_\_\_ cash \_\_\_\_\_

## **Kindergarten**

Registration Fee: Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_  
Check # \_\_\_\_\_ cash \_\_\_\_\_

Curriculum Fee: Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_  
Check # \_\_\_\_\_ cash \_\_\_\_\_

Supply Fee: Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_  
Check # \_\_\_\_\_ cash \_\_\_\_\_