

REGISTRATION FORM 2026-2027



Class _____

Date _____

Full Name of Child _____ Gender _____

Name by which Child is Called _____ Date of Birth _____

Street Address _____ City _____ ZipCode _____

Child is under the custodial care of: both parents mother father
other (please fill in Guardian info below)

**Mother's Name _____

Cell Phone _____ E-mail Address _____

**Father's Name _____

Cell Phone _____ Email Address _____

**Guardian's Name _____

Cell Phone _____ E-mail Address _____

Other children (siblings): _____

Other Adults Living in the Home: _____

Emergency Contact

1) Name _____ relationship _____

Phone number _____

2) Name _____ relationship _____

Phone number _____

Tell us why you wish to enroll your child at our Preschool:

Church Affiliation: _____

If you have no church affiliation or are looking for a church home; you are always welcome at Fairfield Community Church! We worship on Sunday mornings at 11:00. Our children & family ministries are active and vibrant. We would love to have you!

What experience has your child had in group events with other children (play groups, nursery programs, Sunday School, etc.)? _____

Special Information or Concerns

Child's Youth T-Shirt Size (circle one): X-Small Small Medium

Monthly Tuition: Three Days Per Week (Tues/Wed/Thurs) \$180 a month

Registration/Activity Fee:

- 1's class - \$85
- 2's & 3's class - \$110
- 4's class - \$130

*Activity fee covers the cost of field trips and special events.

**Activity fee for Four Year Class also includes Clifford Reader subscription & graduation fee.

Class Schedules: Our 2's, 3's and 4's classes meet on Tuesday, Wednesday, and Thursday from 9 am till noon.

One Year Class *Children must be one year old by August 31st of the enrollment year.*

Two Year Class *Children must be two years of age by August 31st of the enrollment year.*

Three Year Class *Children must be three years of age by August 31st of the enrollment year.*

Four Year Class *Children must be four years of age by August 31st of the enrollment year.*

Parents' Agreement:

I have carefully read the information and policies for the Fairfield CC Preschool Program.
I agree and hereby offer my/our support.

Signed _____ Date _____
In order to hold your child's place and to plan our staffing needs for the school year, your registration fee is due at the time of registration. Classes are subject to change based on number enrolled.

FOR OFFICE USE ONLY:

Date Registration Received: _____ Registration Fee (\$110/\$130) Received: _____

Cash Check Paypal

Fairfield Community Church Preschool
Sheila Breese, Director

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