

# Sugarloaf United Methodist Preschool

## 2018-19 Registration Form

(Please complete one form for each child being enrolled. The NONREFUNDABLE activity & registration fees must be submitted with this form.)

Child's Name: \_\_\_\_\_  
First MI Last

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_  
Month/Date/Year Male/Female

Age as of 9/1/18: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Work Number: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Work Number: \_\_\_\_\_ Occupation: \_\_\_\_\_

Is your child: Currently enrolled?  Yes  No A sibling of a currently enrolled child?  Yes  No

Does your child have any medical, physical or emotional conditions that we should know of?  Yes  No

If yes, please explain: \_\_\_\_\_

Does your child have any allergies?  Yes  No

If yes, please explain: \_\_\_\_\_

Does your child speak English?  Yes  No Home church: \_\_\_\_\_

Please indicate your first and second enrollment preferences

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

I understand that Registration and Activity Fees are NONREFUNDABLE and that, due to teacher ratios, a certain number of children will be enrolled in each class. Under-enrollment in any classroom may result in a change of schedule. September tuition for four year olds is due by June 1st and is also non-refundable.

Signature \_\_\_\_\_

### OFFICIAL USE ONLY

Date Registered: \_\_\_\_\_

Registration Fee Paid:  Yes  No

Ck# \_\_\_\_\_

Amount: \_\_\_\_\_

Activity Fee Paid:  Yes  No