



Registration Information For the 2021-2022 School Year

Registration will be open Monday, March 8 through Wednesday, June 30. Once a class is full enrollees will be placed on a wait-list. Registration Fees are discounted through April 30 only.

Complete one registration form for EACH child you are enrolling.

You must submit an entire Registration Packet and pay the Registration fees in order for your child to be registered to attend.

Due to COVID we are currently accepting Online Registration only. Register at www.hickorygroveumc.com/preschool.

For current students, accounts must be current and up to date before registering for the next year.

Registration Fee for 2020-2021

March 8 - April 30	\$80/child
May 1 - June 30	\$90/child

REGISTRATION FEES ARE NON-REFUNDABLE

If you have any questions about the registration process, please contact Sharon Freeze, Preschool Director, at preschool@hgumc.com or 704-537-4658.

Hickory Grove UM Preschool Registration Checklist

Please check and initial each box to denote that you have read and understood the Policies. Then complete the **SIGN and DATE** box at the bottom.

<input type="checkbox"/> Check <input type="checkbox"/> Initial	DISCIPLINE POLICY We believe in discipline with love and redirection. We do <u>NOT</u> administer any physical punishment. You will be contacted if we have a continuous problem or concern about your child. It might be necessary to request a conference at this time. In rare cases, when a child is out of control and causes harm to a classmate, staff person or himself, the parent will be called to remove the child from the classroom for the remainder of the day. (See Handbook)
--	--

<input type="checkbox"/> Check <input type="checkbox"/> Initial	HEALTH POLICIES I have read and understand the Illness procedures as stated in the preschool handbook. I will not bring my child to school with obvious signs of sickness, i.e. temperature, nausea, skin rash, sore throat, congestion, diarrhea or discharging eyes. <input type="checkbox"/> I will provide and keep my child's emergency card on file and updated as needed for the safe adherence of the illness policy. <input type="checkbox"/> Immunizations must be current up to date - we follow NC state policy. I agree that my child's immunizations are/ will be current as of the 1st day of school (September 8,2020) and will provide a copy immediately if asked.
--	--

<input type="checkbox"/> Check <input type="checkbox"/> Initial	TUITION POLICY I have read and understand that tuition is due on the first of each month. A late fee of \$30.00 is charged for tuition received after the 5 th of each month unless prior arrangements have been made with the director. Tuition is the same amount every month. Tuition is not waived for vacations or sickness. (See page 3)
--	---

Check either Yes or No <input type="checkbox"/> Initial	PHOTO RELEASE POLICY I have read and understood the Photo Release Policy and I select <input type="checkbox"/> Yes or <input type="checkbox"/> No for consent. If neither box is selected, we will consider it a "No" answer and your child will not be photographed. (See page 3)
--	--

<input type="checkbox"/> Check <input type="checkbox"/> Initial	PICKUP POLICY I have read and understand that classes meet from 9 a.m. to 12:45 p.m. daily. My child is to be picked up each day between 12:45 p.m. and 1:00 p.m. Late fee charges begin at 1:01 p.m. Late fees are charged at the rate of \$10 for the first 10 minutes or fraction thereof and an additional \$3 per minute after 10 minutes. (See page 3)
--	--

<input type="checkbox"/> Check <input type="checkbox"/> Initial	PLAYGROUND POLICY I have read and understand the playground rules and I will enforce the playground rules with my child(ren) when using this area outside preschool hours. (See Handbook)
--	---

<input type="checkbox"/> Check <input type="checkbox"/> Initial	HICKORY GROVE UNITED METHODIST CHURCH PRESCHOOL HANDBOOK As the parent/guardian(s) of a child entering Hickory Grove United Methodist Church Preschool, I have read and understand that I am responsible for knowing and following the policies stated in the Preschool Handbook.
--	---

SIGN AND DATE	
I, the undersigned parent or guardian of _____ (child's full name), do hereby state that I have read each statement above and understand the policies, laws, and regulations. *** Please check & initial each box, then sign and date below before submitting application.***	
_____	_____
PRINT PARENT'S NAME Clearly	Date
_____	_____
Signature of Parent (or Legal Guardian)	Date
_____	_____
Accepted By – Signature of Preschool Director	Date

PRESCHOOL REGISTRATION

HICKORY GROVE UNITED METHODIST PRESCHOOL

2021-2022

Child's Name _____ Birth Date _____
 First MI Last Month/ Day/ Year

Preferred Name _____ Sex (Circle) Male or Female Race _____

****Best Email address** _____

INFORMATION ABOUT THE FAMILY

Father's Name _____ Home Phone _____ ****Cell Phone** _____

Address _____ Zip _____

Employer _____ Work Phone _____

Mother's Name _____ Home Phone _____ ****Cell Phone** _____

Address (if different) _____ Zip _____

Employer _____ Work Phone _____

Marital Status Married Separated Divorced Single Widowed/er

Child resides with Both Parents Mother Father Other (please list) _____

****Email Address** _____
 (Mother's Best or Work) (Father's Best or Work)

****It is very important for us to have valid email addresses and cell phone numbers on file. In the event of an emergency we may use an Email and/or Text Blast. Please keep this information up to date!**

EMERGENCY CONTACT

List two people, *other than parents*, who we can contact and/or release your child to, who live **LOCALLY**, in case of emergency.

Name _____ Relationship _____ Best Contact # _____

Name _____ Relationship _____ Best Contact # _____

Select Your Preference Below. Place a check next to the correct age level and select number of days carefully. Children must be classroom age by August 31

1 Year Old Class*
 Mon/Wed/Fri
 Mon-Fri
 *must be walking

2 Year Old Class
 Mon/Wed/Fri
 Mon-Fri

Registration Fee for ALL CLASSES \$80/\$90

Monthly Tuition

1 Year Old Class - 3 days \$245
 5 days \$295

All Other Ages - 3 days \$220
 5 days \$265

Activity Fee - \$45 is due first month

3 Year Old Class*
 Mon/Wed/Fri
 Mon-Fri
 * must be potty trained.

Pre-K Class (4,5)
 Mon/Wed/Fri
 Mon-Fri

Tuition is due on the first of each month. **A late fee of \$30.00 is charged for tuition received after the 5th of each month** unless prior arrangements have been made with the director. Tuition is the same amount every month. Tuition is not waived for vacations or sickness. Families with more than one child in the program will have a 10% discount applied to the tuition rate(s) of the lesser tuition charges. There is a **\$30 handling fee for all returned checks**. Tuition may be paid with cash, check, or PayPal.

Classes meet from 9:00 a.m. to 12:45 p.m. daily. Your child is to be picked up each day between **12:45 p.m. and 1:00**. **Late fee charges begin at 1:01. Beginning at 1:01, late fees are charged at the rate of \$10 for the first 10 minutes or fraction thereof and an addition \$3 per minute after 10 minutes.** Example: A child is picked up at 1:08, 8 minutes late - the late fee is \$10. A child is picked up at 1:15, 15 minutes late – the fee is \$25 (\$10 for the first 10 minutes and \$15 for the next 5 minutes - \$3/minute x 5).

Lunch is brought from home. We do not have facilities for heating or refrigerating lunches.

Music and Movement classes are offered as a part of our curriculum for all children at no additional cost to you. The preschool reserves the right to cancel these programs at any time.

Our teachers provide a curriculum of age appropriate activities each day. We stress social skills and self-help skills rather than academics. Playground time is scheduled every day, weather permitting. We celebrate the secular and religious sides of the holidays.

In general, we follow Charlotte Mecklenburg Schools (CMS) for all holidays and teacher workdays. When CMS is closed due to inclement weather, we will also be closed. A detailed account of this policy can be found in the preschool handbook.

Photo Release Policy- I understand that by registering my child I give Hickory Grove United Methodist Preschool staff the right to take pictures of my child and to put the finished pictures on the church or preschool website, Facebook, brochures, newsletters, presentations or in the preschool hallways. I understand that my child's first name and last initial may be presented with their picture. These pictures will be accessible to anyone with internet access and may be used in instructional settings. **NO PERSONAL INFORMATION SUCH AS NAME, HOME ADDRESS OR PHONE NUMBERS WILL EVER BE PUBLISHED ON THE WEB.** Make sure to check Yes or No on the Registration Checklist Form.

Activity Fee \$45 per year for each child - An activity fee will be collected for each child in our program. Fees will be collected during the month of September and may be included with the tuition payment. This fee will cover all special programs brought to the school during the year. This fee was created to consolidate and simplify the collection of the money. Activity fee money is **not** refundable. Collected fees are not part of any fund-raiser activities.

Each classroom will send out a class roster at the beginning of the school year. We will need your approval before sending this information home with your child's classmates.

No _____ I do not wish to have any information published

Yes _____ I give permission to have the following information published:

Child's Name _____

Parent Name (s) _____

Address _____

Phone _____

Hickory Grove United Methodist Preschool

STUDENT INFORMATION SHEET

All fields must be completed

Child's Name: _____

EMERGENCY CARE INFORMATION

Known Allergies _____

EpiPen required? Yes No (circle one) If yes, a medical release form is required – see the director to obtain form.

Doctor's Name _____ Office Phone _____

Dentist Name _____ Office Phone _____

I agree that in case of an emergency, the Director of the Preschool or any of my child's teachers has permission to seek any medical help she feels necessary for my child if neither parents nor emergency names can be reached OR if the Director feels that the situation warrants emergency care. If it is necessary to call 911 and parents have not responded, my child will be taken to the hospital that the emergency responders suggest.

(Signature of Parent)

(Date)

With whom does your child primarily reside? _____

Are there other children in the family? _____

Names and ages of brothers: _____

Names and ages of sisters: _____

Other living in the home (grandparents, step-parents, step-siblings, etc) _____

Please give us any information concerning your child which will be helpful in his/her experience in group setting (such as play, eating habits, fears, special likes and/or dislikes, speech or hearing difficulties, or other)

Does your child have previous preschool experience? _____ Daycare? _____

If so, where? _____

Does your child play with other children his/her own age? _____

We play outside every day if possible. Does your child enjoy playing outside? _____

During the school year, will your child be staying predominantly at home when not in preschool or will he/she be receiving outside care regularly?