FIRST PRESBYTERIAN CHURCH PRESCHOOL **2024 - 25 SCHOOL YEAR**

Please select class:	LL	Twos	Threes	Fours
Child must be the age of the c	lass by Septem	ber 1, 2024; Little Lea	rners must be 18 m	onths by 9/1/24
Little Learners under 2	years: 3 days a	week, 8:30 - 11 a.m. (d	choice of days, M-F	available)
All other s	tudents 2 years	and older, 5 days/w	eek, 8:30 - 11:30	

APPLI	CATION FOR ENROLLMEN	Т
Director: Registration Date:	Reg Fee:	Accepted:
CHILD'S FULL NAME:		
Child's Preferred name:		Male / Female
BIRTHDATE:	CHILD'S CURREN	TT AGE:
Mother/Guardian:	does c	child live with?
Home ADDRESS:		
Work Name/ADDRESS:		
Cell PHONE:	Work PHONE:	
EMAIL:		
Father/Guardian:		
Home ADDRESS:		
Work Name/ADDRESS:		
Cell PHONE:		
EMAIL:		
Child's Living Arrangement, if not wi	th Parents	
Family Church Affiliation		
Do/Have you another child enrolled	at FPC-PS; whom/when?	
I have completed the registration inform Preschool is a ministry of First Presbyter and Christian preschool education. I und including morning snack and water bottl seek and provide assistance to my child a First Presbyterian Church liable for any o	rian Church, Thomasville, GA and that lerstand that I am to provide my child le. I consent for the Staff of First Pres as necessary, to notify me as soon as f	their staff will provide childcare 's daily personal supplies, byterian Church and Preschool to
Parent/Guardian Signature		Date

FIRST PRESBYTERIAN CHURCH PRESCHOOL STUDENT MEDICAL INFORMATION /AUTHORIZATION FOR RELEASE

Child's Name		
Date of Birth		
Primary Care Provider	Phone	
Medical Insurance (please provide front/ba	ck copy of insurance card)	
Does your child have any allergies , physical problems, mental health disorders, or developmental disabilities that would limit their participation in Preschool program or activities? Please detail and provide supporting documentation, as needed.		
	hool Staff will not dispense scription medication	
	CY CONTACTS der that we should call)	
Parent/Guardian	Phone:	
Employer	Phone:	
Parent/Guardian	Phone	
Employer	Phone:	
Other contacts, if unable to reach parents: Name/Relationship	Phone:	
AddressName/Relationship	Phone:	
Address	Phone:	
Address		
All of the above are authorized to pick my cl	hild up from FPC-PS (initial)	
Parent Signature	Date	

FIRST PRESBYTERIAN CHURCH PRESCHOOL HELP US TO KNOW YOUR CHILD!

(Child's Name)

The following information is very helpful to the teachers and staff in knowing your child better and understanding and meeting his/her needs.
Children often talk about people, or things, that are important to them. Name these people, pets and/or things (names for blankets, stuffed toys/dolls, or other security items):
What other childcare situations has your child experienced?
What are your child's favorite activities?
Does your child have any special fears or anxieties? Please explain.
Does your child have any behaviors that worry you? Please explain.
When your child needs discipline, what method works best for you at home? (FPC Preschool will under no circumstances administer corporal punishment)
Does your child have any habits we need to know about?
Please use additional space to let us know other information that you think might help us in the care and nurture of your child?

FIRST PRESBYTERIAN CHURCH PRESCHOOL

PARENT INVOLVEMENT

Volunteer Nam	e
We love parent involveme Please check below areas where you	
Accompany on Field Trip	S
Drive for Field Trips	
Assist (Volunteer) in class	sroom
Coordinate Teacher Appr	reciations
Playground/Property & 6	equipment maintenance
Costumes, Decorating, H	ospitality
Share talent or hobby	
(Please specify)	
Other:	
(Perhaps we've missed your calli	ng. Let us know!)
On occasion we need paid substitutes	s for teacher absences.
Would you be interested?	Yes No
(Application available upo	on request)

FIRST PRESBYTERIAN CHURCH PRESCHOOL FIELD TRIP PERMISSION SLIP

My child,	
	, has my
permission to go on field trips wi First Presbyterian Churc	•
He/She may partic 1) supervised, walki 2) field trips requiring veh	ing filed trips
Trips requiring transport other than walking the Director at least 2 weeks in advance. Par 1) drive their own child; 2) provide a car seat a FPC-PS staff member or parent volunteer; child.	rents/Guardians will have the option to so that the child may be transported by
Parents/Guardians will be notified of the details be staff/volunteer participation, and time	e
Parent/Guardian Signature	Date
SOCIAL MEDIA/PRES	SS RELEASE
Annual permission authorizing First Presbyterian C church website www.fpcthomasville.org; FPC Thom pictures to local press organizations is required. V Please check and sign	nasville social media sites; and to release Ve will never provide children's names.
Yes, I give my permission for my child's Thomasville website, social media sites and publication	-
No, I do not give my permission for my Thomasville website, social media sites and publication	•
Parent/Guardian Signature	Date

First Presbyterian Preschool Tuition Payment Contract 2024/25

Please carefully read and retain a copy of the contract

First Presbyterian Church Preschool is a not for profit organization and bases all budgeting decisions on full enrollment. We rely on Preschool tuition for operating expenses. Students are enrolled in our program when parents/guardians have completed the following:

- 1. Application for enrollment is submitted, along with the **non-refundable registration fee of** \$250 payable to FPC Preschool
- 2. Signed and submitted the Tuition Payment Contract; Items 1 & 2 should be submitted to the Director of Christian Education
- 3. Confirmation is received that child has been accepted into the program and has a reserved spot in the requested class

<u>Tuition Payment</u> - Tuition is due and payable on or before the fifth (5th) of each month from August to May in ten (10) monthly installments. **Preferred payment method is online at fpcthomasville.org/GIVE**, where you may set up one-time or recurrent payments. Checks or money orders should be made payable to FPC Preschool and may be mailed or delivered to FPC Preschool, 225 E Jackson Street, Thomasville, GA 31792. **Payments should not be left unattended or given to preschool staff; cash payments are not accepted.**

Tuition may also be paid in full and receive a 3% discount. To qualify for the discount, payment for the year must be received by the first day of school as set by the Preschool calendar. Tuition may also be paid in 2 half-year payments, due by August 5 and January 5 (no discount applied). Please see payment schedule below.

<u>Withdrawal Policy</u> - Parents or guardians of children attending First Presbyterian Preschool are expected to pay full tuition as long as they are enrolled. There are no refunds for temporary absences or illnesses. One month's (30 days) written notice must be given to the Director when withdrawing a child. Tuition for the month of withdrawal is required.

<u>Additional Fees</u> - Tuition is due by the 5th of each month. Tuition received after the 5th will be considered late and a late assessment of \$15 will be added. Should tuition payments fall two months behind and payment arrangements not been made, the student will be withdrawn from FPC Preschool. Parents/Guardians shall remain liable for the past due tuition as well as one month's tuition, as per the withdrawal policy. There will be a \$30 charge on any returned checks.

TUITION and FEE SCHEDULE Mid-August through Mid-May

Class	Monthly	½ Year	Full Year
	(10 equal payments)	(August/January)	(2.5% Discount)
Little Learners (3 days)	\$225.00	\$1,125.00	\$2,195.00
All Classes (5 days)	\$225.00	\$1,125.00	\$2,195.00
Early Drop Off	\$50	\$250	\$500 (no disc)

Please note that there is no discount for 3 days a week or attending less than 5 days a week. The Little Learners class requires more staff to child ratio, and therefore more expense per class.

I have read, understand and agree to the terms above regarding tuition payments, withdrawal policy and additional fees as set by First Presbyterian Preschool. I further understand that failure to follow the stated tuition payment and withdrawal policies will result in financial responsibility including but not limited to uncollected tuition and fees and any fees related to collection procedures.

Parent/Guardian Name	Parent/Guardian Signature	
Child's Name	Date	