

1233 Oaklawn Drive, Culpeper, VA 22701 540-825-0764, x 107 www.culpeperumc.org preschool@culpeperumc.org

2024-2025 Application for Admission

Please return this application with a non-refundable enrollment fee of \$80.00. (Early Bird Enrollment for church members and returning families, \$60.00) Make your check payable to Culpeper United Methodist Church and attach it to this form. Culpeper UMC Preschool does not discriminate against any student on the basis of race, creed, or national origin.

Child Enrollment / Information Record

| Child's Last Name | First | Midd | le | | |
|--|------------------------|--|---------------------------------------|--|--|
| Preferred Name | Child's T-shi | Child's T-shirt Size: XS(2-3) S(4-5) M(6-8) L(10-12) | | | |
| Date of Birth | | | | | |
| Please check the desired program (studen | it must be age of desi | red class by September 30, of | the current year, and potty trained.) | | |
| 3 Day Three-Year-Old Program (| Monday, Wednesday | , Friday, 9:00am—12:00pm) \$ | 350.00 per month | | |
| 5 Day Four-Year-Old Program (M | 1onday - Friday, 9:00a | am—12:00pm) \$525.00 per | month | | |
| Child's Home Address / Contact Infor | mation | | | | |
| Address | | | | | |
| Phone | | | | | |
| Parent / Guardian Information | | | | | |
| Mother's Name | | Home Phone | Cell | | |
| Address (if different than above) | | | | | |
| Employer | | Work Phone | | | |
| Father's Name | | Home Phone | Cell | | |
| Address (if different than above) | | | | | |
| | | Work Phone | | | |
| Name of Person with legal custody | | Child lives with | | | |
| | Medical In | formation | | | |
| Child's Physician | | Phone | | | |
| Child's Dentist | | Phone | | | |

| List all allergies, | including food | and medical |
|---------------------|----------------|-------------|
|---------------------|----------------|-------------|

Any chronic physical and/or emotional problems or conditions

| Emergency Contacts (| local contacts only, please) If | parents/guardians cannot be reached | | | | |
|--|---------------------------------|--|------------------------------|--|--|--|
| Name | | Relationship | | | | |
| Address | | Phone | | | | |
| Name | | Relationship | | | | |
| Address | | Phone | | | | |
| Name and Phone Num | bers of persons authorized to | pick up your child (may be the same na | ımes as above) Name | | | |
| | Relation | Phone | Name | | | |
| | Relation | Phone | Name | | | |
| | Relation | Phone | Name | | | |
| | Relation | Phone | Name | | | |
| Schools your child has | attended | | | | | |
| Has your child ever been asked to leave a preschool? | | ol? Any special b | Any special behavior issues? | | | |
| Are you a member of C | CUMC? How did | you hear about CUMC Preschool? | | | | |
| | | | | | | |

Important Information for Parents

Enrollment Policy

Children who are enrolled but not toilet trained at the start of school will not be accepted. ENROLLMENT FEES WILL NOT BE REFUNDED IF YOUR CHILD IS NOT TOILET TRAINED. At parents' request, we can place the child on a waiting list at no cost. The only time a refund of the enrollment fee can be given is if the class is full.

Tuition Policy

The school year's tuition is based on a yearly rate and is collected in nine equal payments. Each payment is due the first of each month, unless other arrangements have been made with the director. A late fee of \$10.00 will be charged after the 5th of the month. A child will not be allowed to continue attending if payment has not been received by the 15th. There is a \$25 returned check fee. There is no deduction for absences, holidays or school cancellations. Checks should be made payable to Culpeper United Methodist Church, or you may pay on our secure preschool webpage at www.culpeper/umc.org. You must give the preschool 30 days written notice if you need to withdraw your child for any reason. CUMC Preschool reserves the right to withdraw a child from our program due to behavioral issues (after parent conferences) with two weeks' notice to the parents.

Curriculum Fee

There will be a non-refundable curriculum fee of \$130.00 due by August 1, prior to the start of the school year.

Parent / Guardian Signature Date _____

rev. 1.2023