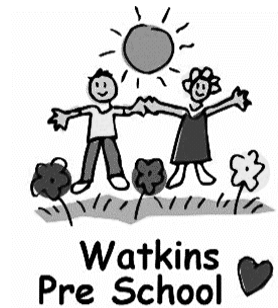


Watkins Methodist Pre School & Mother's Day Out
9800 Westport Rd. Louisville, KY 40241
425-8042 gswumc@bellsouth.net



Non-refundable Registration Fee for 2012 - 2013

Check # _____ \$115 Date _____

Child's Name _____ Date of Birth _____ Sex: M or F

Name you want on the child's work _____

Address _____ City _____ State ____ Zip _____ Co. _____

Email Address _____ Home Phone _____

Family Information

Mother's Name _____ Cell Phone _____

Place of Employment _____ Business Phone _____

Father's Name _____ Cell Phone _____

Place of Employment _____ Business Phone _____

If parents are separated or divorced, with whom does the child live? _____

Names and Ages of brothers and sisters (Please indicate if they do not live in the household with the child.) _____

Please list any other persons living with the child and their relationship to the child. _____

Pick Up

Person authorized to pick up child in an emergency

Name	Address	Relationship	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Classes are listed below by **day, time** and **monthly fee**.

Please indicate first choice with #1 and second choice with #2.

Transitional 3s	Threes	Fours – Pre K classes
9:15 to 12:15	9:00 to 12:00	9:00 to 12:00
___ Mon, Tues (\$147)	___ Mon, Tues (\$147)	___ Mon, Tues (\$147)
	___ Thurs, Fri (\$147)	___ Wed, Thurs, Fri (\$198)
	___ Mon, Tues, Wed (\$198)	___ Mon, Tues, Wed (\$198)
	___ Wed, Thurs, Fri (\$198)	___ Mon, Tues, Wed, Thurs (\$259)
	8:45 to 11:45	8:45 to 11:45
	___ Mon – Fri (\$290)	___ Mon – Fri. (\$290)

Our non-refundable registration fee is \$115.00 and it is not applied toward tuition. Tuition for the nine month classes is paid monthly except for Sept. and May's tuition and that is due by **Aug. 1**.

Total yearly tuition _____ 3% savings if yearly total is pd. in full by Aug. 1.

2-day classes - \$1323.00	\$1283.00
3-day classes - \$1782.00	\$1729.00
4-day classes - \$2331.00	\$2261.00

Our five day classes are in session from in August until May. Tuition is paid monthly for **ten months**.

5-day classes - \$2900.00	\$2813.00
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Personal History

Is child right-handed or left handed? _____

Has child had a previous group or pre school experience? Describe _____

***List any allergies child has: _____

List any medications child takes on a daily or weekly basis: _____

Are there any medical problems or a medical history of which we should be aware _____

Are there any physical or emotional considerations? _____

Pediatrician _____

Phone _____

Insurance Company _____

Policy # _____

Name of Insured _____

In the event of a medical emergency, and I nor anyone else listed on this registration form can not be reached, I hereby authorize the Watkins Preschool to obtain emergency care for my child.

Parent's Signature _____

I give permission for my child's name, address, parent's names and phone number to be included in our Watkins Preschool and MDO Directory which is then given out to each family. _____ Yes, _____ No

Parent's Signature _____

May your child have milk, juice, drink mix, cookies, crackers, etc. for snack? _____ Yes, _____ No

May your child have special birthday and holiday party snacks? _____ Yes, _____ No

Are there any dietary restrictions? _____ Yes, _____ No Please explain. _____

I give my permission for my child to be photographed or video taped in conjunction with the Preschool or MDO activities. This is for use within the school, school programs, or to send home to parents. _____ Yes, _____ No

Parent's Signature _____

How did you learn about our Pre School?

____ Friend ____ Church ____ Yellow Pages ____ Church Sign ____ Other

Please initial acknowledgement of the following:

____ Registration fee and September's tuition is not refunded in case of withdrawal.

____ Sept and May's tuition for the 9 month classes is due by Aug. 1. All other tuition is paid monthly.

____ We are required to have a current KY immunization form for your child on file.

____ All children must be potty trained except for those in the **transitional threes** class.

____ Annual snack fee is collected by August 1. (2 day class \$20, 3 day class \$30, 4 day class \$40, 5 day class \$50.)

____ Children in our care are treated with respect and consideration. The same is expected of the children towards a teacher or classmate. If a child's behavior is inappropriate and improvements are not satisfactory, it will result in a child's dismissal from our program.

____ Our two, three and four day classes begin the first week of September.

(Our five day classes begin in August and end in May the same as Jefferson County Schools.)

I hereby make application for the admission of my child to the Watkins Memorial United Methodist Church Pre School and I submit the information on this form.

Signature _____ Date _____

Printed Name _____

➔Pre School with Extended Care

Hours of operation are 8:00 to 5:00. Children in this program will begin in Aug. and end the same day as Jefferson County.

Weekly fees include the cost of the morning 8:45 to 11:45 Pre School program.

____ 5 days \$130.00 ____ 4 days \$110 ____ 3 days \$90.00 ____ 2 days \$65.00

Additional information for the Extended-day - please initial your acknowledgment of the following:

____ Tuition is paid each Monday morning.

____ An additional \$5.00 is added for every day tuition is late.

____ A \$10.00 afternoon snack fee is added to the morning snack fee for extended day.

____ Our 5-Day Pre School schedule for the extended day classes will follow JCPS school schedule.
