



FUMC 2018 Summer Preschool

- Session 1: May 29 - June 8
- Session 2: June 11 – June 22
- Session 3: July 2 – July 13
- Session 4: July 16 – July 27

We believe each child is a gift of God—a special, unique and precious person.

Child's Name	DOB	Age	M/F	Allergies

Parent/Guardian Information

Parent Name	Home Address (Street, City, ZIP)		
Home Phone	Cell Phone	Place of Employment	Work Phone

Parent/Guardian Information

Parent Name	Home Address (Street, City, ZIP) if different from above		
Home Phone	Cell Phone	Place of Employment	Work Phone

Primary Email Address – Please Print Clearly	
---	--

I would like my child to attend FUMC Summer Session, Monday–Friday, 9:00 am – 12:15 pm

<u>Session 1</u>	<u>Session 2</u>	<u>Session 3</u>	<u>Session 4</u>
May 29 – June 8 (Monday, May 28 No School) Cost: \$195	June 11 – June 22 Cost: \$215	July 2 – July 13 (Wednesday, July 4 No School) Cost: \$195	July 16 – July 27 Cost: \$215
2.5 - 3 yrs. old _____ 4 – 5 yrs. old _____	2.5 – 3 yrs. old _____ 4 – 5 yrs. old _____	2.5 – 3 yrs. old _____ 4 – 5 yrs. old _____	2.5 – 3 yrs. old _____ 4 – 5 yrs. old _____

Payment at time of registration is required to hold a space in the class. Please note that at least 5 children are needed to make a class. Tuition will be refunded if there are not enough enrollment. There is no registration fee.

For Office Use Only	
Tuition Amount: _____	Check # (paid in full) _____
Start Date: _____	Teacher: _____



FUMC Permissions and Policies

Please list those people who are authorized to pick up your child **excluding yourself**. The people listed below must present ID in order for our staff to release your child. **NO EXCEPTIONS** will be made regarding this policy.

Other than Parent/Guardians, please list those authorized to pick up child:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Emergency contact (In the event we are not able to reach a parent... we will call this number first.)

Name: _____ Phone #: _____

Permissions and Policies:

I give my permission to First United Methodist Church to take pictures or videos of my child. These pictures and videos will be used by the teacher and school only. These photographs and videos will not be used for any publicity.

Parent Signature: _____ Date: _____

I _____ give permission for an FUMC Preschool Staff member to apply hand lotion and/or sunscreen to my child, _____, for the prevention of dry skin and/or sunburn.

Parent Signature: _____ Date: _____

I have received a copy of the Parent Handbook. I understand that the program reserves the right to terminate services if policies and procedures are not followed.

Parent Signature: _____ Date: _____



Parent Medical Authorization

I hereby grant permission for steps to be taken as are necessary to obtain emergency medical care for my child. These steps include, but are not limited to:

1. Attempt to contact the parent/guardian.
2. Attempt to contact child’s physician.
3. Attempt to contact a parent through emergency contact people listed on registration form.
4. In the event that we cannot contact your child’s physician, we will do any or all of the following:
 - A. Call another physician
 - B. Call an ambulance
5. Any expense incurred under item #4 will be the responsibility of the child’s family.
6. The school will not be responsible for anything that may happen as a result of false or incomplete information given at the time of enrollment.
7. The school will not assume responsibility for a child who has not been signed in by an adult upon arrival at the school.

I hereby agree to comply with the above policies and procedures and allow for the release of medical information provided by me to the school should such an emergency occur.

Child’s Name: _____

Parent’s Signature: _____ Date: _____

Other Medical Information:

Regular Physician: _____ Phone #: _____

Preferred Hospital: _____ Phone #: _____

Insurance Information

Company: _____ Policy #: _____

I would like more information about First United Methodist Church: YES _____ NO _____