# 2025-2026 Registration Form



Located in the buildings of Fayetteville First United Methodist Church 175 E. Lanier Avenue Fayetteville, GA 30214 (770) 461-4313, ext 124 FayettevilleFirst.com/preschool

Fay etteville First Preschool @gmail.com

This form is also available in an online form you can submit electronically: FayettevilleFirst.com/preschool has a link, or via a direct link at tinyurl.com/FFUMCregister25

To reserve your child's placement in a classroom, you must return these forms completed with the *non-refundable registration fee*.

Whic	h class is your child registering for?
<ul> <li>12-17 months Tues/Th</li> <li>18-24 months M/W</li> </ul>	(Age as of September 1, 2025)3-year olds - 3 days3-year olds - 4 days2-year olds - 4 days4-year olds - 4 days**3-day programs are Tues, Wed, and Thurs**4-day programs are Mon to Thurs
Child's Name:	
First	Middle Last
	Gender: Male Female Race: DOB:/_/
Address: City:	
PARENT/GUARDIAN INFOR	
Guardian 1 Name:	Email:
Cell:	Work Phone:
Place of Employment:	Occupation:
Relationship to Child:	
Guardian 2 Name:	Email:
Cell:	Work Phone:
Place of Employment:	Occupation:
Relationship to Child:	
INFORMATION ABOUT YOU Names and ages of siblings: Child lives with	
To be considered potty trained, a child identifying when to use the restroo independently. We understand acciden	NO <b>**Must be potty trained for 3 or 4 year old classes.</b> can use the bathroom independently, which includes: being comfortable asking or m without reminders, pulling pants up/down, and being capable of wiping ts happen, but frequent or multiple accidents in a day are indications a child is not e notified if their child is not regularly in control of his/her bathroom needs.
Has your child previously attende	ed a preschool? Yes No If so, where?
	No If not, what language is spoken? restrictions?
	ation that would further contribute to a better understanding of your curity item, fears, etc.)

## **RELEASE AUTHORIZATIONS:**

Who besides the parents/guardians listed above are authorized to pick up your child:					
<u>Name</u>	<u>Relationship to child</u>	<u>Contact Number</u>			

Is there anyone specific that is **NOT** authorized to visit or pick up your child? If so, please list here:

### **EMERGENCY INFORMATION:**

In case of an emergency, whom should we contact <u>if we cannot reach parents/guardians?</u>

Name	Relationship					
Address						
Cell: Home Phone:						
Is this person authorized to transport your child? YES	S NO					
EMERGENCY MEDICAL CONTACT:						
Family Doctor:	Phone:					
Insurance Company:	Group/ID Number:					
Hospital Preference:						
Current prescribed medications and doses:						
Known drug allergies or reactions:						
MEDICAL INFORMATION:						
Does your child have any allergies? (Specifically if food	l. skin. or environmental) YES NO					
If yes, please list and describe the reaction.						
Are there any physical limitations or past medical histo	ory that we should be aware of?					
Does your child receive any of the following services?						
Speech Therapy YES NO	Physical Therapy YES NO					
Occupational Therapy YES NO	Babies Can't Wait YES NO					
PHOTOGRAPH AUTHORIZATION:						
Please circle "yes" or "no" for each the following:						
YES NO Pictures of your child may be taken for use w	Pictures of your child may be taken for use within Fayetteville First Preschool,					
including class projects and bulletin boards.						
	Pictures of your child may be taken for use on Fayetteville First Preschool					
	on Fayetteville First Preschool					
website, social media, and publications.	-					
website, social media, and publications.YESNOPictures of your child may be taken for use of	on Fayetteville First United Methodist					
<ul><li>website, social media, and publications.</li><li>YES NO Pictures of your child may be taken for use o Church website, social media, and publication</li></ul>	on Fayetteville First United Methodist					
website, social media, and publications.YESNOPictures of your child may be taken for use of	on Fayetteville First United Methodist					

Would you like information about FFUMC? YES NO

## AGREEMENT

Fayetteville First UMC Preschool agrees to provide care from August 2025 to May 2026 and will follow the Fayette County School calendar for holiday and weather related closures, with the exception of some additional days that we have scheduled (refer to our school calendar for a full list of these dates).

Fees and tuition can be paid via our online portal (tinyurl.com/FFUMCPayOnline) or mailed/delivered to the office at 175 E. Lanier Avenue, Fayetteville, GA 30214. Please note that all payments made online will incur an additional processing fee.

## PLEASE READ AND INITIAL EACH OF THE FOLLOWING:

<u>REGISTRATION FEE</u>: There is a registration fee of one month's tuition for all classes due at registration. I understand that this fee is *non-refundable*, does *not* apply toward any month of tuition, and is used for materials. Discounts are available for multi-children registration upon request.

<u>ACTIVITIES FEE</u>: Each student has a one-time \$50 activities fee due at Meet the Teacher in August. The activities fee is in addition to August tuition and is non-refundable.

<u>TUITION AGREEMENT</u>: The annual tuition is prorated over 10 months starting in August and ending in May. Tuition is due on the first of each month. We accept checks or money orders made payable to Fayetteville First UMC Preschool. Online payments are also accepted through the FFUMC website (\*an online payment fee will apply). A Late fee of \$50.00 will be added if tuition is not paid by the <u>fifth</u> of each month. Students with an unpaid balance after 30 days are subject to removal from the program. Pay-in-full discount available.

### **Registration and Tuition Fees:**

Classes	<b>Registration Fee</b>	<u>Monthly Payment</u>	<b>Annual Tuition</b>
1 year old (2 day)	\$230	\$230	\$2,300
2 year old (3 day)	\$260	\$260	\$2,600
2 year old (4 day)	\$270	\$270	\$2,700
3 year old (4 day)	\$270	\$270	\$2,700
4 year old (4 day)	\$270	\$270	\$2,700

<u>WITHDRAWAL</u>: Withdrawal of your child's enrollment requires 30-day <u>written</u> notice or one month's tuition payment. I understand if tuition is due during the 30-day period, I am responsible for its submission.

<u>IMMUNIZATION FORM</u>: I acknowledge that my child must have the current immunization record (Form 3231) on file by the first day of school or cannot be admitted until this form is received.

<u>EMERGENCY TRANSPORTATION</u>: I hereby authorize Fayetteville First UMC Preschool to have my child transported to a licensed physician or medical treatment center to treat my child in case of an emergency. I understand that in case of an emergency requiring a trip to the emergency room, my child will be transported to a hospital ER at the discretion of an EMT.

<u>LEGAL GUARDIAN</u>: I represent that I am the legal guardian of the child enrolled and acknowledge that it is my responsibility to keep all information and authorizations pertaining to my child current and up to date.

\_ I understand that Fayetteville First UMC Preschool is not licensed by Bright From the Start or Georgia Department of Early Care and Learning and is not required to be licensed by the state of Georgia. *For and in consideration of services, the Fayetteville First UMC Preschool workers and the Fayetteville First United Methodist Church are providing for the guardians and children involved, the guardians do hereby relieve the Fayetteville First United Methodist Church and all workers in the Preschool programs who may be working on the day or days when said guardians' children are in attendance, from any liability or fault due to any accident or illness that may occur to said children while children are in attendance for the program. Additionally, guardians do hereby relieve any and all workers of the Preschool programs and any and all medical personnel of any liability in connection with medical treatment to said children in the program.*