

For Office Use Only:

Registration Fee _____

Medical Form _____

Application Date _____

St. John's Playschool
100 St. John's Church Road
Concord, NC 28025

Registration Form

2-year old classes meet from 8:45am - 11:45am

3-year old classes meet from 8:45am - 11:45am

4-year old classes meet from 8:45am - 12:15am

Registration Fee: \$40.00 per child all classes (non-refundable)

Important: Children must have reached their second, third, or fourth birthday by August 31st are

PLEASE NOTE: If you are registering more than one child in your immediate family, please ask about the available 10% discount on the monthly tuition. There is no discount on the registration fee.

Child's Full Name _____

Nickname or Name used most often: _____

Boy _____ Girl _____ Age _____ Date of Birth _____

Parent (s) or Guardian (s): _____

Single _____ Separated _____ Married _____ Divorced _____

Check the class for which you are registering and return this form along with your registration fee.

_____ 2-year old class, Tuesday & Thursday \$98.00/month

_____ 2-year old class, Wednesday & Friday \$98.00/month

**** If you do not have preference for the 2-year old class days, please indicate by checking. _____ This helps with the class placement.

_____ 3-year old class, Tuesday & Thursday \$98.00/month

_____ 3-year old class, Monday thru Thursday -(Limit 11) \$139.00/month

(Since we have a limit of 11 children, these registration forms will be numbered in the order they are received.)

_____ 4-year old class, Monday, Wednesday, and Friday \$123.00/month

_____ 4-year old class, Monday thru Friday (Limit 14) \$155.00/month

(Since we have a limit of 14 children, these registration forms will be numbered in the order they are received.)

Complete Mailing Address (including zip code) _____

Home Phone Numbers: Work Phone Numbers: Place of Employment: Pager or Cell Numbers:

Mother: _____

Father: _____

E-mail address: _____

Information About Your Child:

Does your child have any known allergies? _____ If yes, what are they, be specific please:

Please give any information concerning your child which will be helpful in his/her experience in group work or play (ex. Play, eat, sleeping habits, special fears, likes or dislikes)

Sibling Information: Please list names and ages of brothers and sisters: _____

What elementary school will your child attend? _____

Church Membership:

Are you a member of a church? (Circle one) Yes No

If you are a member, complete the following:

Name of Church: _____

Town/City: _____ State: _____

Which best fits your attendance activity as a church member? (Circle One)

Most Sundays One time a month A few times a year Rare

If you are not an active member of a church, would you like the pastor of St. John's to contact you? (Circle One) Yes No

Emergency Care Information:

Name of child's doctor: _____

Office phone #: _____

Name of child's dentist: _____

Office phone #: _____

In case of an emergency, if neither father or mother, nor guardian can be contacted call:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

I give my permission to my child's teacher or the director to authorize the physician of her choice to provide emergency care in the event that neither the family physician nor I can be contacted immediately.

Signature of Parent or Guardian

Date

Emergency Care Information :

Name of child's doctor: _____ Office phone #: _____

Name of child's dentist: _____ Office phone #: _____

In case of an emergency, if neither father, mother, nor guardian can be contacted, call:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

I give my permission to my child's teacher or the director to authorize the physician of her choice to provide emergency care in the event that neither the family physician nor I can be contacted immediately.

Signature of parent or guardian

Date

February 2011

Dear Parents,

We are delighted that you are interested in St. John's Playschool Program. We will strive to make your child's first experience of "school" a pleasant and rewarding one. Our curriculum is based on the "Whole Child". It is designed to help children develop socially, emotionally, physically, intellectually, and spiritually. It also encourages our students to learn not only from us, but from each other through play.

Enclosed you will find a registration and medical form. Please fill out both sides of the form and return them along with your registration fee of \$40.00 to St. John's Playschool, 100 St. John's Church Road, Concord, NC 28025 by Friday, March 25th. The medical form can be filled out and signed by the parents. Please list any allergies and write in their immunization dates or you can just get me a copy of their shot record.

Upon return of your registration form and fee to Playschool, your child will be enrolled in our program. You will receive an enrollment confirmation letter. Our yearly payment policy includes nine payments. The first one will need to be made by Wednesday, May 25th. The first tuition installment, like the registration fee, is non-refundable. Your next installment will be due by September 15th. This will be to be your October payment. You will always be paying a month in advance. (See the back of this letter for the payment schedule.)

At the beginning of August, you will receive a letter letting you know the dates of orientation as well as the date for the first day of school.

If you have any questions regarding our playschool program, please call the playschool office between the hours of 8:30 am—12:30pm at 704-436-9274 or me at home at 704-436-2753. You can also reach me by e-mail at acharwood1@yahoo.com.

Our staff looks forward to meeting you and your child/children and having your family become a part of St. John's Playschool.

Sincerely,



Anna C. Harwood
Playschool Director

2011-2012 Payment Schedule

All payments are due on the first of the month except May and September. There dates will be listed.

May 25>September payment
September 15.....>October payment
October 1.....>November payment
November 1.....>December payment
December 1.....>January 2012 payment
January 1.....>February payment
February 1.....>March payment
March 1.....>April payment
April 1>May payment

April's payment will be the last payment for the 4 year olds who will graduate from St. John's.

May 1>September 2012 payments

This will be for students who will return the following year.