

California Heights United Methodist Children's Center  
1160 E. Bixby Rd.  
Long Beach, CA 90807  
562-595-0056

Preschool Lic. # 191601679

Afterschool Lic. # 191605684

Summer 2019  
Preschool Enrollment Form

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Current student at Cal Heights? \_\_\_\_\_ Age in Sept. 2019 \_\_\_\_\_



**Parent Information**

Parent's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Parent's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Vacation Discounts:**

Vacation discounts are for full-weeks (M-F) only. They are calculated prior to the start of each session. There is no compensation for absences other than prearranged vacation weeks. Schedules cannot be changed after the start of each session.

**Summer Registration Fee:**

One \$25.00 fee is charged for new students.

**Music Program:**

We offer a preschool music program in the summer. There is a one-time mandatory material fee of \$30 for the program.

**Payments:**

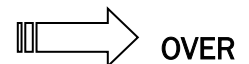
Tuition is due before or on the first day of each session.

**Directions:**

Please complete the Enrollment Information and return it to the school office. The office will calculate your amount due. Any outstanding fees from the school year must be paid prior to enrolling for summer.

I agree to the above charges and all policies in the California Heights United Methodist Children's Center Handbook.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_



**Session I  
June 17-28**

Check one:

8:00-12:30 \_\_\_\_\_

7:00-6:00 \_\_\_\_\_

Check one:

T Th \_\_\_\_\_

MWF \_\_\_\_\_

M-F \_\_\_\_\_

Please write down your vacation weeks for Session I.

Vacation: \_\_\_\_\_  
\_\_\_\_\_

**Session II  
July 1-26  
(Closed 4<sup>th</sup> and 5<sup>th</sup>)**

Check one:

8:00-12:30 \_\_\_\_\_

7:00-6:00 \_\_\_\_\_

Check one:

T Th \_\_\_\_\_

MWF \_\_\_\_\_

M-F \_\_\_\_\_

Please write down your vacation weeks for Session II.

Vacation: \_\_\_\_\_

**Session III  
July 29-August 15  
(Closed August 16-27)**

Check one:

8:00-12:30 \_\_\_\_\_

7:00-6:00 \_\_\_\_\_

Check one:

T Th \_\_\_\_\_

MWF \_\_\_\_\_

M-F \_\_\_\_\_

Please write down your vacation weeks for Session III.

Vacation: \_\_\_\_\_

**Session I  
June 17-June 28**

**For Office Use Only  
Session II  
July 1-July 26**

**Session III  
July 29-August 15**

Total Tuition \_\_\_\_\_

Vacation Discount \_\_\_\_\_

Registration \_\_\_\_\_

Music Program \_\_\_\_\_

T-shirt \_\_\_\_\_

Cot Sheet \_\_\_\_\_

Key Fob \_\_\_\_\_

Total Paid \_\_\_\_\_

Check #/Cash \_\_\_\_\_

Total Tuition \_\_\_\_\_

Vacation Discount \_\_\_\_\_

Registration \_\_\_\_\_

Music Program \_\_\_\_\_

T-shirt \_\_\_\_\_

Cot Sheet \_\_\_\_\_

Key Fob \_\_\_\_\_

Total Paid \_\_\_\_\_

Check #/Cash \_\_\_\_\_

Total Tuition \_\_\_\_\_

Vacation Discount \_\_\_\_\_

Registration \_\_\_\_\_

Music Program \_\_\_\_\_

T-shirt \_\_\_\_\_

Cot Sheet \_\_\_\_\_

Key Fob \_\_\_\_\_

Total Paid \_\_\_\_\_

Check #/Cash \_\_\_\_\_