

#### Preschool/Afterschool

Fair Grove United Methodist Church
"Constructing God's Kingdom one kid at a time!"

336-475-3464

www.fairgrovekingdomkids.com

## Fall 2019-2020 Preschool Registration Form

Preschool Ages (Ages 12mo-Pre-K)

### Juition and Fees

Registration Fee—\$40.00 (Early Registration\_\$30.00-until July 14th)

2 days—\$120.00/month
3 days—\$140.00/month
5 days—\$175.00/month
Breakfast Club—\$20.00/month

Hours: 900am-12:00pm
Breakfast Club begins at 8:00

\*Begins September 3rd, 2019

# Fair Grove Kingdom Kids Student Registration Form

Office Use Only:
Date Received
Registration Fee \$
Start Date

			Start Date
Name of Child:			
First	Middle	Last	
Prefers to be called		Birth date	
Address			
City	Zip Code		
	<u>Far</u>	nily Information	
Parents/Legal Guardian's Na	me		_
Address		(if differe	nt than child's)
City	Zip Co	ode	
Employer		Nork Phone	Cell Phone
Email address			
Parents/Legal Guardian's Na	<b>m</b> e		_
Address			
City	Zip Co	ode	
Employer	Wc	ork Phone	Cell Phone
Email address			
Person Responsible for Acco	ount		_ Phone #
Emergency Contact Name:_		Number	:
Relation to Child			
Check how many dau	յs you are íntere	sted in:	

Breakfast Club

5 day

3 day

2day\_



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## Student Health Form

Child's Name	D.O.B		
Emergency Information:			
1st Contact Name	Number		
2nd Contact Name	Number		
Child's Physician:	Number		
Child's Dentist:	tist:Number		
Insurance Policy Holder:			
Insurance Name			
Insurance Policy Number: Group Number:			
Please list your child's allergies	(including foods) and health concerns:		
Please list current medic medication ac	ations: (medication forms are required for all lministered by Kingdom Kids staff) 		
In the case of an emergency, 9	11 will be called and the child will be transported to the nearest hospital.		
*Please attach your ca	híld's most recent immunization record.		
ties, and to use the photographs and/c	photograph and/or videotape my child participating in daily activi- or videos in photographic displays, advertising or other publications showing these daily activities.		
Parent's Signature:			



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## Photography Release Form

I release Fair Grove Kingdom Kids to photograph and/or videotape my child participating in daily activities, and to use the photographs and/or videos in photographic displays, advertising or other publications showing these daily activities.

Student's Name:	
Parent's Name:	
Signature of Parent/Guardian:	
Date:	