

APPLICATION FORM 2026 - 2027 SCHOOL YEAR

Child's full name _____

Circle one: Male Female Date of birth _____

3 Year Old Class: (*Your child must be 3 years old by September 1st*)
_____ Mondays, Wednesdays, and Fridays

4/5 Year Old Class: (*Your child must be 4 years old by September 1st*)
_____ Mondays, Wednesdays and Fridays

When possible, we enroll children with special needs such as speech, hearing, developmental delays, and allergic or medical conditions. Please list any that apply to your child

Parent/Guardian

Relationship to child

Mailing Address

Phone Number - home _____

cell _____

Preferred Email _____

Parent/Guardian

Relationship to child

Mailing Address _____

Phone Number - home _____

cell _____

Preferred Email _____

We are members of Grace UMC, Centre Hall Circle: Yes No

We have had a child previously enrolled in GUMP Circle: Yes No

ENROLLMENT AGREEMENT (please initial each line)

- _____ I have included my registration fee, understanding that it is **not refundable**.
- _____ I will pay tuition by the **5th** day of each month, and I understand that I owe a \$10 late fee if not paid by then and a **\$25 late fee** in any subsequent month where payment is later than the 5th.
- _____ If I find it necessary to withdraw my child from Grace Playschool, I will give a **minimum two week withdrawal notification** to my child's teacher. If the minimum two weeks notification is not given, I **will not** receive a refund of my security deposit.
- _____ I understand **no tuition reimbursement** will be given for partial month attendance.
- _____ Upon acceptance, to keep my child's space, I will mail in the following:
 1. A security deposit check to cover one month's tuition
 2. Written proof of my child's immunizations
- _____ I take full responsibility for the transportation of my child to and from the Playschool.
- _____ As a parent, I agree to provide my child with a labeled, tree nut and peanut free snack each school day.

I hereby apply to enroll my child at Grace Playschool and agree to the above responsibilities as his/her parent/guardian

Name _____ Date _____