



ENROLLMENT AND TUITION APPLICATION

School Year 2024 - 2025

Child's Full Name: _____ Boy or Girl: _____

Child's Birthdate: _____ Nickname (to be used on cubbies, name tags, etc.): _____

Parents Names: _____ & _____

Preferred Phone Numbers: _____ & _____

Mailing Address: _____ City: _____ Zip: _____

Parent E-mail addresses: _____ & _____

Class Options: (Please understand that class offerings may be adjusted if minimum enrollment is not met. Half Day Programs are from 9am – 12pm, Full Day Programs are from 9am – 3:15pm. Please contact director if assistance is needed.)

3 Year Olds: (3 as of Sept. 1) T/Th/F Half Day: _____ \$345
T/Th/F Full Day: _____ \$575
T/W/Th/F Half Day: _____ \$450
T/W/Th/F Full Day: _____ \$680

PK: (4 as of Sept. 1) T/Th/F Full Day: _____ \$575
T/W/Th/F Half Day: _____ \$450
T/W/Th/F Full Day: _____ \$680

Please enroll my child in Universal City United Methodist Preschool. The tuition total for my child will be _____ per month, payable on the 1st day of each month, September through May. I understand that if I terminate my child's enrollment at Universal City United Methodist Preschool, I am required to give two weeks written notice. I understand that I will pay tuition for those two weeks. No refunds will be given for tuition already paid for the month. A \$150 Registration Fee is required to secure a spot in a classroom. No refunds will be given for the registration fee. In addition, I understand Semester Supply Fees of \$150 per semester will be due on Sept. 30 & Jan. 31. Please initial: _____

LATE FEE POLICY: Tuition payments made after the 10th day of any month will be assessed a \$50.00 late fee. If my child's tuition payment is more than 60 (sixty) days late, interest on the amount delinquent will accrue at the rate of 6% per month. If the services of an attorney are required to collect delinquent tuition fees, I hereby agree to pay all attorney's fees and court costs in addition to the tuition due. Please initial: _____

Should my child's tuition be 60 (sixty) days delinquent, I understand that my child's participation in the Universal City United Methodist Preschool program may be immediately terminated.

Date

Signature of Parent/Guardian

90 WINN AVENUE UNIVERSAL CITY, TEXAS 78148
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