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## **2019-2020 Registration Form**

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**Child’s First Name Last name Nickname Date of Birth**

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**Street Town Zip Code Phone#**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother’s Name Cell/Work# Father’s Name Cell/Work#**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email(s)L**

A **non-refundable registration fee of $175** is due for new students and $150 for returning students with this form in order to secure a spot for your child in our program. Tuition is figured as an annual fee. There are two payment options: **1)** Paid in full by May 1st, 2019 with a 5% discount; **2)** Paid in 5 installments with the first payment due May 1st, 2019 and the balance being paid in four more payments due 9/1/19, 11/1/19, 1/1/20, & 3/1/20. **All payments are non-refundable.** CASH OR CHECKS ONLY payable to “The Methodist Preschool”.

**My child will be:** \_\_2.9 years old in Sept \_\_3 years old by Sept 1st \_\_4 years old by Sept 1st

Please choose from the following options:

**2 Days~Tues & Thurs~(2.9 & 3 year olds only)~$2590**

**9:00-12:00 \_\_$2460.50 paid in full \_\_five payments of $518**

**3 Days~Mon, Wed & Fri~(2.9, 3 & 4 year olds)~$3600 OR**

**3 Days-Tues, Thurs & One Other Day~(4 year olds only)~**

**9:00-12:00 \_\_$3420 paid in full \_\_five payments of $720**

**4 Days- Any 4 Days~(4 year olds only)~$4875**

**9:00-12:00 \_\_$4631.25 paid in full \_\_five payments of $975**

**5 Days- Mon through Fri~(2.9, 3 & 4 year olds)~$6190**

**9:00-12:00 \_\_$5880.50 paid in full \_\_five payments of $1238**

I have read this form as well as the Fees Schedule and understand that ***I am responsible for the total tuition for the 2019-2020 school year whether my child attends the full year or not.*** The Methodist Preschool reserves the right to cancel or change any program.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent Date**