

**2018-2019
REGISTRATION FOR
Faith First Learning Center @ St. Columba Church**

CHILD'S NAME _____ **Male** ___ **Female** ___
(Please print clearly)

DATE OF BIRTH _____

FATHER'S NAME _____ **OCCUPATION** _____

MOTHER'S NAME _____ **OCCUPATION** _____

MAILING ADDRESS _____
_____ **Zip** _____

E-MAIL ADDRESS _____

HOME PHONE NUMBER _____

MOTHER'S CELL PHONE NUMBER _____

FATHER'S CELL PHONE NUMBER _____

OTHER CHILDREN AT HOME (names, ages, relation)

Emergency Contacts (names and phone numbers):

Local _____
Name Phone Cell Phone

Other _____
Name Phone Cell Phone

Signature _____

<p><i>For Office Use Only:</i></p> <p>Date Received _____</p> <p>Registration Fee \$45 _____</p> <p>Check _____ Cash _____</p> <p>3 year old program _____</p> <p>4 year old program _____</p>
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BACKGROUND INFORMATION

Does your child have any allergies to food? _____

Other allergies? _____

Does your child have any health problems that we should be aware of? _____

Please explain _____

Is there anything else you would like us to know about your child? vision, hearing, speech, eating problems, unusual abilities or disabilities? Is your child receiving any Early Intervention or services? Does your child have any special interests?

AUTHORIZATIONS

EMERGENCY AUTHORIZATION

I understand that every effort will be made to notify me as soon as possible. In the event of accident or illness, the representative of the St. Columba Staff has my consent to have medical or surgical treatment of an emergency nature given to my child/children and have the authority to take my child/children from the building to seek medical assistance. I agree to assume the financial responsibility for any diagnosis and or medication deemed necessary.

Child's Physician: Name _____ Office Phone _____

Emergency Hospital Preference _____

Parent/Guardian

CLASS LISTS

Faith First Early Learning Center@ St. Columba distributes a class list that is furnished to all families in that class. The list includes address, home phone and e-mail address. I authorize release of this information to other class members.

Parent/Guardian

PHOTO RELEASE

I understand that occasionally Faith First Early Learning Center @ St. Columba functions and programs are covered by local news agencies. In addition, photos may appear in the St. Columba weekly bulletin and on the school web site. Last names will never be used in print to identify your child in a picture. For safety reasons, no photos of the children will be placed on Facebook. Faith First Early Learning Center @ St. Columba has my permission to release pictures of my child for the reasons mentioned above.

Parent/Guardian

Faith First Early Learning Center @ St. Columba Church

Programs for Three-Year Olds

Your child must be 3 by December 1, 2017.

	<u>Days</u>	<u>Time</u>	<u>Monthly Fee</u>
AM	Tuesday – Thursday	9:00 – 11:30	\$120.00 monthly
PM	Tuesday – Thursday	12:00 – 2:30	\$120.00 monthly
AM	Mon., Wed., Fri.	9:00 - 11:30	\$145.00 monthly
PM	Mon., Wed., Fri.	12:00-2:30	\$145.00 monthly
AM or PM	Mon. – Friday		\$240.00 monthly
*** Full Day	Mon., Wed., Friday	9:00-2:30	\$265.00 monthly
	Mon., Wed., Thurs., Fri.	9:00-2:30	\$335.00 monthly
	Mon. – Friday	9:00-2:30	\$385.00 monthly

Programs for Four-Year Olds

Your child must be 4 by December 1, 2017.

	<u>Days</u>	<u>Time</u>	<u>Monthly</u>
AM	Mon., Wed., Fri.	9:00 - 11:30	\$145.00 monthly
PM	Mon., Wed., Fri.	12:00-2:30	\$145.00 monthly
AM or PM	Mon. – Friday		\$240.00 monthly
*** Full Day	Mon., Wed., Friday	9:00-2:30	\$265.00 monthly
	Mon., Wed., Thurs., Fri.	9:00-2:30	\$335.00 monthly
	Mon. – Friday	9:00-2:30	\$385.00 monthly

~ Please note that Five Day Programs are dependent upon enrollment!

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FINANCIAL INFORMATION

- 1. Registration Fee:** A \$45 fee is payable upon registration. This fee is non-refundable. All registration fees include an activity fee.
- 2. Security Tuition:** One month's tuition is payable by July 1, 2018. **Please note that this security tuition will be applied to the June 2019 tuition.** If a student withdraws from the program any time up to October 6th, a refund will be prorated, and that amount will be refunded. After October 6th, the security tuition will **not** be refunded.
- 3. Monthly Tuition:** Monthly payments are due by the first of each month. The monthly tuition will not be prorated due to illness, holidays, snow days, vacations or cancellations. All checks are made payable to:

St. Columba Church

3-year old Program _____

4-year old Program _____

- 4. Returned checks:** All returned checks are subject to the service charge as indicated by our bank.

WITHDRAWAL POLICY

Faith First @St. Columba Church reserves the right to remove a child from the program when tuition payments are delinquent by two months. If you are experiencing difficulty with the tuition payments, please bring that to the attention of the Director.

I have read and understand the above Financial Information and Withdrawal Policy. This agreement is made on _____ between Faith First @ St. Columba Church and _____.

(Please Print) (Parent/Guardian)

Parent

Director