

FIRST UNITED METHODIST PRESCHOOL

419 NE First Street Gainesville, FL 32601 352-373-0108/Fax 352-372-2524 fumpers@fumcgv.org

Application for Admission for 2008-2009 School Year

Child's Name _____ Date of Birth _____

Parent Name/s _____

Address _____

City _____ Zip Code _____

E-mail address _____ Phone _____

Religious Affiliation _____

List previous social settings to which your child has been exposed _____

How did you hear about our preschool? _____

Select the class according to child's age on September 1st of the school year for which you are registering:

All classes from 9am to noon

Two Year Old Classes:

_____ Mon. & Wed. \$135/month or _____ Tues. & Thurs. \$135/month

Three Year Old Classes:

_____ Mon., Wed., Fri. \$160/month or _____ Mon. - Fri. \$215/month
(Combined w/ 4's on Tues. & Thurs.)

Four Year Old Classes:

_____ Mon., Wed., Fri. \$160/month or _____ Mon. - Fri. \$215/month
(Combined w/ 3's on Tues. & Thurs.)

We offer Lunch Bunch on Mondays from 12 to 1pm (\$4/day) / We offer Early Drop every day at 8:30am (\$2/day)

Registration Fee - \$60/school year

Please submit the registration fee with this application.

The registration fee is nonrefundable.

Tuition will be refunded if you give a two week notice of departure.

I have read the policies set forth in the handbook and agree to abide by them.

Signature

Date