

Winterville First Baptist Church
Weekday Early Education Preschool Program
305 N. Church Street
Winterville, GA 30683
Telephone: 706-742-2921 Fax: 706-742-7377
www.wintervillefirstbaptist.org

Dear Parents,

We are excited about beginning registration for your child in the Winterville First Baptist Weekday Early Education Preschool Program for the 2010-2011 school year. Plans are already underway to make next year a great learning experience for your child.

Enclosed you will find an Application form, Parent Agreement form, and a Health Record form. The Application form and Parent Agreement form need to be filled out and returned along with the non-refundable registration fee and other applicable fees to the school as soon as possible to ensure your child's enrollment for the upcoming school year. We do enroll children on a first-come and first-served basis. The Health Record form may be turned in anytime before school starts.

Information about next year:

1-year olds (Sept. 1, 2010)

Days:	Wednesdays
Time:	9:00 A.M. until 12:00 Noon
Registration Fee:	\$ 75.00
Monthly Tuition:	\$ 85.00

2-year olds (Sept. 1, 2010)

Days:	Tuesday and Thursday
Time:	9:00 A.M. until 12:00 Noon
Registration Fee:	\$110.00
Monthly Tuition:	\$145.00

3 & 4-year olds (Sept. 1, 2010)

Days:	Tuesday, Wednesday, and Thursday
Time:	9:00 A.M. until 12:00 Noon
Registration Fee:	\$125.00
Monthly Tuition:	\$160.00

Mandatory Fees:

WFBC WEE School bags required for each student: \$7.00
WFBC WEE School t-shirts required for all four year olds: \$8.00
(These t-shirts are optional for purchase for our 1, 2 and 3 year olds.)

Meet-n-Greet: Saturday morning, August 28, 2010

Open House: Thursday morning, September 2, 2010

First day of school: Tuesday, September 7, 2010

You will be receiving a letter from your child's teacher in August. If you have any questions about the program, please don't hesitate to call (706-742-2921). We look forward to teaching your child.

Thank you,

Gina Shealy
WFBC Preschool Director

Winterville First Baptist Church

Weekday Early Education Preschool Program

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Winterville, GA 30683 (706-742-2921)
www.wintervillefirstbaptist.org

General Information:

Program applying for: 1-year old _____
2-year old _____
3-year old _____
4-year old _____

Name _____ Name used at home _____

Allergies (Food, Insect, Medicine) _____

Date of Birth _____ Present age _____ Sex _____

Address _____ Home phone # _____

County _____

School your child will attend kindergarten _____

E-mail address _____

Family Information:

Father's Name _____ Occupation _____

Phone Number _____ Cell phone # _____

Mother's Name _____ Occupation _____

Phone Number _____ Cell phone # _____

Is child adopted? _____ If so, at what age? _____

Biological Mother? ___ Biological Father? ___ Stepparent? (Which?) ___ Divorced? ___

Death of a Parent? (Which?) _____

Names and Ages of other children in family _____

Other persons living in the home? _____

Previous preschool program attended _____

Church you attend _____

Talents or interest which either parent or guardian would like to share with the class _____

How did you hear about the WEE Program? Friend ___ Ad ___ Marquee ___ Web ___

Emergency Information:

Name of child's doctor _____ Phone _____ Hospital Preference _____

Person authorized to act for parents in emergency:

1. Name _____ Phone _____ Cell phone # _____

2. Name _____ Phone _____ Cell phone # _____

Persons authorized for pick-up:

1. Name _____ Phone _____ Cell phone # _____

2. Name _____ Phone _____ Cell phone # _____

3. Name _____ Phone _____ Cell phone # _____

For office use: Reg. Fee ___ Date ___ Parent Agree ___ Imm./Med Form ___ P. Hand ___

HEALTH RECORD
WEEKDAY EARLY EDUCATION PRESCHOOL PROGRAM
WINTERVILLE FIRST BAPTIST CHURCH
305 N. CHURCH STREET
Winterville, GA 30683
706-742-2921/ fax 706-742-7377
www.wintervillefirstbaptist.org

Name of Child _____
Date of Birth _____

Medical History

Measles _____ Mumps _____
Chicken Pox _____ Whooping Cough _____
Flu _____ Meningitis _____
Convulsions ___ If so, explain _____
Allergies (list) _____

Is there any evidence of:

Hearing loss or difficulties? _____

Vision difficulties? _____

Speech Disabilities? _____

List any that apply:

Hospitalizations _____

Operations _____

Other serious illnesses _____

An immunization card or FORM 3231, signed by a physician, must be submitted along with this Child's Health Record. These forms must be turned in before your child begins school.

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Parent's Agreement

1. We do (___) do not (___) give my permission for my child's name, parent's names, address, and phone number to be published in the Winterville First Baptist Church Weekday Early Education (WEE) Preschool Directory.
2. We do (___) do not (___) give my permission for my child's picture to be published on the Winterville First Baptist Church Weekday Early Education (WEE) Preschool website.
(www.wintervillefirstbaptist.org)
3. We will cooperate with the Winterville First Baptist WEE Preschool Program, seeing that our child is in good health every day that he/she attends, keeping him/her at home if the child shows symptoms of a cold, other illness, or fever within the last 24 hrs.
4. We will report the date of any known exposure of our child to a contagious disease.
5. We understand that the Preschool Committee reserves the right, upon examination of all credentials of a child, to decide whether our school meets the needs of the registrant. If the child, under the observation of teachers, and other qualified professionals, is having difficulty performing at an appropriate developmental age level, is having difficulty adjusting to school, or is disrupting the learning environment for other children, efforts will be made within the Winterville WEE Preschool Program to resolve the situation for the optimal benefit for all parties involved. This may result in withdrawal from school if necessary. If there is information on the child's previous difficulties that were unknown or withheld from this application, and the problems become unmanageable, the child may not be allowed to return.
6. We understand that the school hours are from 9 A.M. to 12 Noon on Wednesday for one-year olds, Tuesday and Thursday for two-year olds, and Tuesday, Wednesday, Thursday for three and four-year olds. Children should not be brought to school prior to 8:55 A.M. A \$5.00 late fee will be charged for children who are picked up after 12:15 P.M., with a \$5.00 charge per 15 minutes per child thereafter. We further understand that the school will be in session for nine months. The school year is based on school months of twenty days, the shorter months, with holidays, being balanced by the longer months. Tuition will be the same each month..
7. We understand that the tuition for one-year olds is \$85.00 per month, two-year olds is \$145.00 per month. Tuition for three and four-year olds is \$160.00 per month. Tuition is payable in advance and due the first day of each month. There is a \$10.00 late charge on each payment made after the fifteenth of the month. Any check received after the fifteenth must include the \$10.00 late fee. We further understand that no refunds will be made for withdrawals or absences during a month.

8. We understand that enrollment of our child is for the full school year. However, our child may be withdrawn from the school during the school year upon prior notification of thirty days. If we anticipate that our child will only be enrolled for part of the year, we will give a hand-written explanation for this situation. Without prior notification, we will pay the full tuition for the current month and the month following withdrawal. Any other change of plans requiring withdrawal requires thirty days prior notification.

If withdrawn, and re-enrollment is desired during the same school year, we understand that this decision may involve the Weekday Early Education Committee's approval and an agreement to abide by the school's re-enrollment guidelines.

9. In case of an emergency, if parents or guardian cannot be reached, we give permission for medical treatment for our child.

10. We understand that only the authorized people we have listed on the application form will be allowed to pick up our child. Written permission is expected to release your child with anyone else, and positive identification may be requested before child is released.

11. Enclosed is a registration fee of \$75.00 for one-year olds, or \$110.00.00 for two-year olds, or \$125.00 for three or four-year olds, which will cover the cost of supplies for the school year. I understand that the registration fee is non-refundable. Payment for a WFBC school bag (\$7.00) for any new student, as well as a WFBC t-shirt (\$8.00) for four-year old students is included.

12. That we are the child's legal guardian and will provide the school with a copy of any court orders if there are custody difficulties.

13. That the information submitted on this form is correct and true.

14. We understand that the school will make every effort to prevent accidents, but in the case of an accident, neither Winterville First Baptist Church nor the Winterville First Baptist WEE Preschool Program will be held liable. I also understand that if medical treatment is necessary, my child is covered by my health insurance.

15. We will help provide a nutritional snack for our child's class on a rotating basis along with the other parents in our classroom. (Approximately 3-5 times a year.)

16. We, as parents, agree to work alongside the Preschool staff to provide a pleasant and positive learning experience for our child.

Signed _____ Date _____
(Parent or Guardian)

Signed _____ Date _____
(Parent or Guardian)

If you register your child before May 1, 2010, you receive \$10.00 off the registration fee at the time that your child is registered. Registration fees received **after May 1** are as follows:

1-year olds-\$75.00
2-year olds-\$110.00
3 & 4-year olds-\$125.00

Gina Shealy
Director

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