



**Penfield United Methodist Preschool**

1795 Baird Road  
Penfield, New York 14526  
(585) 381-3190  
director.pump@gmail.com  
Becky Gardner, Director

Registration Application

2020-2021

**Student Information**

Student's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_ Please check: F \_\_\_ M \_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birthday: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Can we include your directory information in our class list? Yes \_\_\_ No \_\_\_

Would you prefer to receive Monthly Newsletters: Paper \_\_\_ Email \_\_\_ Both \_\_\_

**Family Information**

Father's Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Family Church: \_\_\_\_\_

List all children including this child in birth order:

	<u>Sex</u>	<u>Age</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of Persons Authorized to Pick Up: \_\_\_\_\_

Name of Persons NOT Authorized to Pick Up: \_\_\_\_\_

In Case of Emergency and Parents Cannot Be Reached:

1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Medical Condition or Allergies: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_

Hospital of Choice: \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I agree that in the case of an accident or injury, emergency medical care may be given in the event I or the person designated cannot be reached. \_\_\_\_\_(initial)

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

**Programs** (Please indicate your top 3 choices; 1st, 2nd & 3rd)

Class	Indicate top three choices	Days/ Times	Age Requirements	Pricing	Additional Information
<b>2/ 3 Year Old Program</b>		<b>Two Days</b> Monday/ Wednesday AM 9:00-11:30	Must be Two Years Old by Mar 31, 2020	\$1143/year or \$127/month	Ideal for older two year olds & younger three year olds
		<b>Two Days</b> Tuesday/ Thursday AM 9:00-11:30	Must be Two Years Old by Mar 31, 2020	\$1143/year or \$127/month	Ideal for older two year olds & younger three year olds
<b>3 Year Old Program</b>		<b>Two Days</b> Tuesday/Thursday AM 9:00-11:30	Must be Three Years Old by Dec 1, 2020	\$1143/year or \$127/month	
		<b>Three Days</b> Monday/Wednesday/Friday AM 9:00-11:30	Must be Three Years Old by June 30, 2020	\$1395/ year or \$155/month	
		<b>Two Days</b> Monday/Wednesday PM 12:30-3:00	Must be Three Years Old by Dec 1, 2020	\$1143/ year or \$127/ month	
<b>3 Year Old Enrichment Program</b>		<b>One Day</b> Friday AM 9:00-11:30	Must be Three Years Old by December 1 <sup>st</sup> and enrolled in a three-year-old class	\$252/ year or \$28/ month	Ideal for children looking for additional fun and learning
<b>Pre-Kindergarten 4 Year Old Program</b>		<b>Three Days</b> Monday/Wednesday/Friday AM 9:00-11:30	Must be Four Years Old by Dec 1, 2020	\$1395/ year or \$155/month	
		<b>Four Days</b> Monday/Tuesday/Wednesday/Thursday PM 12:30-3:00	Must be Four Years Old by Dec 1, 2020	\$1746/ year or \$194/ month	
<b>Pre-Kindergarten 5 Year Old Program</b>		<b>Five Days</b> Monday/Tuesday/Wednesday/Thursday/ Friday AM 9:00-11:30	Must be Five Years Old by Jan 31, 2021	\$2115/ year or \$235/ month	Ideal for children turning five in the fall of the calendar year

**A NON-REFUNDABLE registration fee of \$100 is required with EACH application.** (\$50 each application will be applied to your first months tuition)  
**(15% tuition discount for siblings)**

**Office Use Only**

Registration Check #: \_\_\_\_\_ Class Assignment: \_\_\_\_\_

Notes/Comments: \_\_\_\_\_