

DAVIDSON UNITED METHODIST CHURCH PRESCHOOL



2019—20 APPLICATION FOR ENROLLMENT

Check all that apply: _____ DUMC members (joined by 1/1/19) _____ New to DUMC Preschool

Name of Child: _____ Date of Birth: _____

Sex: M ___ F ___ Home Telephone: _____

Address: _____ City: _____ Zip: _____

E-mail address for all DUMCP communications: _____

Mother's Name: _____ Work or Cell Phone: _____

Father's Name: _____ Work or Cell Phone: _____

To ensure that your child receives maximum benefit from our program, please describe any special needs your child has (i.e. food or other allergies, social skill delays, physical challenges, etc.)

Registration Fee (\$80.00 1st child; \$60.00 2nd child): \$ _____ First Tuition \$ _____

Students for all classes must be designated age by 8/31/19.

Please prioritize your class choices with 1, 2 or 3.

We will not be able to place your child in a class that you have not indicated as an option.

- Transitional Kindergarten (TK) Five Year Olds _____
- Four Year Olds: 4 day (T,W,Th,F) _____ 4 day + Monday _____
- Three Year Olds: MWF _____ MTTH _____ TTH _____
- Two Year Olds: MWF _____ TTH _____

The Registration fee and the May 2020 tuition is NON-REFUNDABLE if you receive placement in DUMC Preschool for the 2019-2020 school year. Please sign below noting that you have read this statement.

Signature: _____ Date: _____