



Great Falls United Methodist Preschool
10100 Georgetown Pike
Great Falls, Virginia 22066
703-759-2432 www.gfump.org office@gfump.org

2021-2022 (Rolling) Application for Enrollment

Please register my child _____ in the:

Indicate your 1st choice:

18-Months through 2 ½ -Year-Old Program

- _____ Tuesday/Thursday 9:15 a.m. to 12:15 p.m. (\$270 a month)
- _____ Tuesday/Wednesday/Thursday 9:15 a.m. to 12:15 p.m. (\$395 a month)

2 ½ - 3 ½ -Year-Old Program

- _____ Tuesday/Wednesday/Thursday 9:15 a.m. to 12:15 p.m. (\$395 a month)
- _____ Tuesday/Wednesday/Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$515 a month)

3-Year-Old Program (older 3's) – Students must be fully toilet trained.

- _____ Tuesday/Wednesday/Thursday 9:15 a.m. to 12:15 p.m. (\$395 a month)
- _____ Tuesday/Wednesday/Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$515 a month)

4-Year-Old / Pre-K Program – Students must be fully toilet trained.

- _____ Tuesday/Wednesday/Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$515 a month)
- _____ Monday/Tuesday/Wednesday/Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$640 a month)

An optional Extended Day (12:15 p.m. - 1:15 p.m.) is available for our 3's and 4's daily for an additional fee.

Last week of classes: June 6th – 10th

- A non-refundable application fee of \$75 must be received before processing the Application.
- Please make checks payable to *GFUMP*.

Acceptance to Great Falls United Methodist Preschool is contingent upon approval by the Preschool Board of Directors. Upon notice of acceptance, a security deposit will be due.

Our ability to best serve the interests of your child depends upon complete and accurate information. Please take the time to carefully read and respond to all portions of this application form.

By signing this application, the Parent or Guardian of this child agrees to comply with the rules of the Preschool as set by the GFUMP Board of Directors and as described in the Parent Handbook. Failure to comply with all rules may result in dismissal of the child from the Preschool.

Signature of Parent or Guardian

Date

Application for Enrollment

Child's Full Name _____ Nickname _____

Sex: M or F Date of Birth _____ Place of Birth _____

Previous Preschool or Child Care Program _____

Location (City, State) _____

Home Address _____
Street City State Zip Code

May your address, phone number, and email be listed in the Student Directory? Yes ___ No ___

Are you a member of Great Falls United Methodist Church? Yes ___ No ___

Other Church Affiliation _____

Parent/Guardian 1 _____ Parent/Guardian 2 _____

Marital Status _____ Marital Status _____

Cell Phone _____ Cell Phone _____

Work Phone _____ Work Phone _____

Email _____ Email _____

Occupation _____ Occupation _____

Workplace _____ Workplace _____

Siblings: (Names & Ages) _____

Is English spoken at home? ___ Do you have live-in relatives? ___ Live-in housekeeper? ___ Nanny? ___

The following information is required so that we might meet the physical, mental and emotional needs of your child. Failure to disclose pertinent medical information or educational assessments may result in dismissal from the Preschool.

1. Is your child toilet trained? (Not required for the under 2's programs) Yes ___ No ___

2. Does your child:

- have any allergies? No ___ Yes ___ List type and severity on a separate sheet of paper.
- require an epi-pen or inhaler? No ___ Yes ___
- require medication on a regular basis? No ___ Yes ___ List: _____
- have an existing physical condition affecting classroom behavior or participation? No ___ Yes ___
- have diagnostic reports or assessments from previous teachers, therapists or other service providers concerning the ability to function in a normal classroom setting? No ___ Yes ___

If you have answered "yes" on any part of question #2, attach additional information and all diagnostic reports or assessments to your child's application for review. Children with special needs may require observation and/or evaluation by the teacher and Director before being recommended for acceptance to the Preschool. After acceptance, any further evaluations must immediately be brought to the attention of the Director.