



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

2023-2024 Application for Enrollment

Please register my child _____ in the:

Indicate your 1st choice:

2 -Year-Old Program – Students must be two by 9/30/23

_____ Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$270 a month)

_____ Monday/Tuesday/Wednesday 9:15 a.m. to 12:15 p.m. (\$405 a month)

3-Year-Old Program – Students should be toilet trained.

_____ Monday/Tuesday/Wednesday 9:15 a.m. to 12:15 p.m. (\$405 a month)

_____ Monday/Tuesday/Wednesday/Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$675 a month)

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

_____ Monday/Tuesday/Wednesday/Thursday 9:15 a.m. to 12:15 p.m. (\$540 a month)

_____ Monday/Tuesday/Wednesday/Thursday/Friday 9:15 a.m. to 12:15 p.m. (\$675 a month)

An optional Extended Day (12:15 p.m. - 1:15 p.m.) for children 3-years-old or older is available daily for an additional fee. Registration information can be found on Page 3 of this application.

Classes run the Tuesday after Labor Day through two weeks following Memorial Day.

- A non-refundable application fee of \$75 must be received before processing the application.
- Please make checks payable to GFUMP.
- Applications for church families, returning students, siblings of currently enrolled students and alumni are due by **January 15, 2023** for first consideration.
- Open Enrollment for new families will begin January **23, 2023**.

Acceptance to Great Falls United Methodist Preschool is contingent upon a 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 continues on pages 2 and 3.

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? No ____ Yes ____ Is another language spoken at home? If so, please list. _____

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 an unsafe environment for your child.

1. Is your child toilet trained? No ____ Yes ____

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 additional help or support. To better serve children with special needs, we may request observation and/or evaluation by the teacher and Director.

Application for Enrollment

Stay & Play Registration

GFUMP offers an optional hour for three, four and five-year-old preschoolers (who are toilet trained) Monday through Friday. Children bring their lunch and stay from 12:15 p.m. to 1:15 p.m. Parents may choose one or all the days that their child attends school.

SIGN-UP

Please indicate your preference below. A formal registration will go out to enrolled families in August, which will finalize registration. For planning purposes please indicate your anticipated preference below.

_____ I plan to enroll my child each day, that he or she attends school, for the entire school year at a \$10 an hour rate.

_____ I plan to enroll my child at some point after the school year begins. If an established routine is communicated with the Preschool Director I will be billed at the \$10 an hour rate.

_____ I plan to use the privilege of "drop in" Stay & Play and will be billed at the rate of \$15 each hour. I understand I will need to check with the Director to ensure there is space for my child.

_____ I do not plan to extend my child's day.

Billing

Stay & Play charges vary, depending upon the number of days offered each month. We cannot accommodate "makeups" for missed days due to sickness or vacation

**If you sign up for daily Stay & Play your schedule should correlate with the number of days your child attends school weekly. If you wish to modify this, please reach out to the Preschool Director for a more specialized registration plan. Stay & Play fees will be added to the following month's tuition.*