

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

Dear Parents,

We are excited about beginning registration for your child in the Winterville First Baptist Preschool Program for the 2021-2022 preschool year. Plans are already underway to make next year a great learning experience for your child.

Enclosed you will find an Application form and Parent Agreement 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-serve basis. A current unexpired Immunization Form # 3231 MUST be signed by a physician and turned in no later than the end of September. Immunization Forms may also be faxed to 706-742-7377.

Information about next year:

1 & 2-year olds (Sept. 1, 2021)

Days:	Tuesday and Thursday
Time:	9:00 A.M. until 12:00 Noon
Registration Fee:	\$ 150.00 (Family Max \$260.00)
Monthly Tuition:	\$ 165.00 (\$5.00 Sibling Discount)

3 & 4-year olds (Sept. 1, 2021)

Days:	Tuesday, Wednesday, and Thursday
Time:	9:00 A.M. until 12:00 Noon
Registration Fee:	\$150.00 (Family Max \$260.00)
Monthly Tuition:	\$195.00 (\$5.00 Sibling Discount)

If you prefer, the 2021-2022 tuition for the year for our 2 day a week program is \$1,485.00 (which does not include registration). Tuition for our 3 day a week program is \$1,755.00 (which does not include registration). If you pay the entire tuition for the school year, your child will receive a free school bag and shirt.

**** If you register before May 1, 2021, you receive a discounted registration fee! (1 child \$130.00 and 2 or more a family maximum of \$240.00)**

Mandatory Fees:

WFBC WEE School bags required for each student: \$10.00
WFBC WEE School t-shirts required for all four year olds: \$10.00
(These t-shirts are optional for purchase for our 1, 2 and 3 year olds.)

Open House: Thursday morning, September 2, 2021

First day of school: Tuesday, September 7, 2021

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,
Jackie Holloway
WFBC Preschool Director

Winterville First Baptist Church

Preschool Program

305 North Church Street

Winterville, GA 30683 (706-742-2921)

www.wintervillefbc.org

General Information:

Program applying for:

1-year old _____

2-year old _____

3-year old _____

Pre-K/4-year old _____

Name _____ Name used at home _____

Allergies (Food, Insect, Medicine) _____

Date of Birth _____ Present age _____ Sex _____

Address _____ Home phone # _____

County _____

Is there any evidence of the following: Hearing Loss _____ Vision Difficulties _____

Speech Impairments _____

School your child will attend kindergarten _____

Mother's E-mail Address (Please print legibly) _____

Father's E-mail Address (Please print legibly) _____

(This is our primary form of communication with parents.)

Family Information:

Father's Name _____ Place of Employment _____

Work Number _____ Cell phone # _____

Mother's Name _____ Place of Employment _____

Work Number _____ Cell phone # _____

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

Does child live with both parents: Yes ___ No ___ If no, list with whom child lives: _____

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 WFBC Preschool 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 # _____

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Parent's Agreement

Child's Name _____ Parent's Name _____

1. We do () do not () give my permission for my child's picture to be published on the Winterville First Baptist Church Preschool website (www.wintervillefbc.org) and Facebook page.
2. We will cooperate with the Winterville First Baptist 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.
3. We will follow School COVID Guidelines. We will report the date of any known exposure of our child to a contagious disease.
4. 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 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.
5. We understand that the school hours are from 9 A.M. to 12 Noon on Tuesday and Thursday for one-year olds and 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 each 15 minute increment per child thereafter.
6. We understand that the tuition for one-year olds and two year-olds is \$165.00 per month. Tuition for three and four-year olds is \$195.00 per month. **There are nine tuition payments due each school year, beginning the first week of September through the first week of May. Yearly tuition is divided evenly over nine monthly payments regardless of your child's illness, the holiday schedule, or the length of the month.** Tuition is due the 1st full week of each month. Any check received after the first full week of the month must include a \$25.00 late fee. We further understand that no refunds will be made for withdrawals or absences during a month.
7. We understand that enrollment of our child is for the full school year. If my child must be withdrawn from Preschool during the school year, I understand that the current month tuition must be paid regardless of days left in the month.

8. In case of an emergency, if parents or guardian cannot be reached, we give permission for medical treatment for our child which will be covered by our health insurance.

9. 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.

10. I understand that the registration fee and monthly tuition payments are non-refundable.

11. We understand that as the child's legal guardian we will provide the school with a copy of any court orders if there are legal custody rulings.

12. We understand that the information submitted on this form is correct and true.

13. 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 Preschool Program will be held liable. **I also understand that if medical treatment is necessary, my child is covered by my health insurance.**

14. 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.)

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

Child's Full Name _____

Signed _____ Date _____
(Parent or Guardian)

Signed _____ Date _____
(Parent or Guardian)