



PRESCHOOL ENRICHMENT PROGRAM REGISTRATION FORM

Child's Name _____

Class age this Sept. '10: (circle) 1 2 3 4

Address: _____

City: _____ Zipcode: _____

Parent's Names: _____

Primary Phone: _____

Cell: _____

Cell: _____

Work #: _____

Email: _____

Emergency Contact: _____

Phone: _____

Child's Doctor: _____

Phone _____

Allergies/Special Concerns: _____

Checks or money order must be made payable to Norcross First UMC and turned into the Church office.

Parental Agreement: I understand that neither Norcross First UMC, nor its employees, or volunteers can be held responsible for any injuries received by my child before, during or after any class activity. In case of emergency, the church employees or volunteers have my permission to call doctors, ambulance or use any hospital in the child's best interest.

I give permission for my child's photo to be used in print or website material.

Parent Signature _____ Date _____

Please check the classes/days your child will attend.
There are no refunds for missed classes.
FALL SESSION: SEPTEMBER 13 – DECEMBER 17, 2010

Ages 3's and 4's:	Cost/Month
_____ Mondays-LilChamp Sports	\$50 _____
_____ Tuesday-Playful Picassos	\$25 _____
_____ Wednesdays-Music & Motion	\$45 _____
_____ Thursdays-Around The World	\$30 _____
_____ Fridays-Ballet/Tap	\$50 _____
_____ Fridays-Wiggles & Giggles	\$25 _____
_____ I will pick up my child at 3:00	
_____ 3:00-4:00 Option-5 days/wk	\$97 _____
_____ 3:00-4:00 Option-3 days/wk	\$65 _____
Monthly Total _____	

Ages 1's and 2's:	Cost/Month
_____ Mondays-WeeMove	\$25 _____
_____ Tuesdays-WeeGames	\$25 _____
_____ Wednesdays-WeeMake&Take	\$25 _____
_____ Thursdays-WeeTunes	\$25 _____
_____ Fridays-Wiggles & Giggles	\$25 _____
_____ I will pick up my child at 3:00	
_____ 3:00-4:00 Option-5 days/wk	\$97 _____
_____ 3:00-4:00 Option-3 days/wk	\$65 _____
Monthly Total _____	

I understand this monthly total is due no later than August 15, September 15, October 15 and November 15.

Parent Signature _____ Date _____