Annandale United Methodist Church
Weekday Preschool
6935 Columbia Pike, Annandale, VA 22003
(703) 256-1100
wps@annandale-umc.org

FOR OFFICE USE ONLY

Date Rec'd_____
Start Date: 9-11-17 **End Date:** 6-12-18
Enroll Agreemt _____
I.D. Verification _____
Child's Health Form _____
Perm for Emerg. Care _____
Allergy Care Plan _____
Dismissal Release _____
Handbook Agreemt _____
Initial Info Form _____
Emerg. Info Card _____
Photo Release _____
Info Release _____

2017-18

APPLICATION FOR ADMISSION

I am applying as: *(Circle one)* AUMC Member | Current WPS/ELP/CDC | Alumnus Family or Current WPS/ELP Waitlist | First-time Registering

Child's Name_____ Age on Sept. 30, 2017: _____
LAST FIRST MIDDLE

Name Child goes by: _____ ○ Boy ○ Girl Date of Birth: _____/_____/_____

Home Phone# (____)_____ Mom's Cell# (____)_____ Dad's Cell# (____)_____

Address_____
STREET CITY ZIP CODE

Home E-mail:_____ Work E-mail: _____

Names of Parents, Guardians and/or Agency Having Legal Custody of Child: _____

Child resides with: ○ Mother ○ Father ○ Both ○ Other:_____

Father:_____ _____ (____)_____
LAST FIRST OCCUPATION BUSINESS PHONE

Mother: _____ _____ (____)_____
LAST FIRST OCCUPATION BUSINESS PHONE

Emergency Contact:_____ _____ (____)_____
Someone local, other than Parents/Guardian LAST FIRST RELATION PHONE

Sibling Names:	**Age**	**Attend(ed) AUMC WPS or ELP?**
1._____	_____	○ Yes ○ No
2._____	_____	○ Yes ○ No

ALLERGY to food and/or materials? ○ No ○ Yes *If so, what?_____
**Please ensure that you complete and turn in an Allergy Care Plan*

How did you find out about us?_____

MORNING CLASS OPTIONS (based on child's age on September 30, per Fairfax County Public Schools)

Priority is given to those coordinating sibling schedules and those who are also enrolling for Extended Day and Late Day classes.
Class placement is subject to change or cancellation based on enrollment.

3-year-old classes:	TWTh*	MTWTh	MTW	Th-F
4-year-old classes:	TWTh	MTWTh	TWThF	M—F

Monthly Tuition
Due the first class day of each month

2-day classes	$204
3-day classes	$307
4-day classes	$407
5-day classes	$499

**This class was created to accommodate families needing Early Morning, Extended Day, or Late Day classes. Therefore, enrollment in at least one of these classes is required.*

Preferences: 1st choice:_____ 2nd choice:_____ 3rd choice:_____

Comments/Concerns about independent toileting: _____

Would you like to add an **EXTENDED DAY CLASS** on TU, W, and/or TH from **12:00NOON to 2:30PM?**

Which days? (Circle) **Tuesdays** **Wednesdays** **Thursdays**

Monthly Tuition

1-day classes	$106
2-day classes	$212
3-day classes	$318

Would you like to add **LATE DAY CLASSES** on TU, W, and/or TH from **2:30PM to 5:30PM?**

Which days? (Circle) **Tuesdays** **Wednesdays** **Thursdays**

Monthly Tuition

1-day classes	$127
2-day classes	$254
3-day classes	$381

I understand that in order to register my child, I must complete this form, sign it, and attach the registration fee. I am aware that the **Registration Fee** of $**125 per child is non-refundable** once my child receives placement in the program. A $**65 Materials/Activity Fee** will be collected with the June Tuition Security Deposit.

I understand that one month's **Tuition Security Deposit** must be paid by May 30, 2017 [or within 30 days of enrollment if after May 30], to secure my child's placement in all classes, and that this will serve as my June 2018 tuition payment. I realize that failure to pay the advanced payment will be considered my child's withdrawal from the program. I am aware that written notification of withdrawal or decreasing the number of days enrolled in morning or afternoon classes **must** be received by **July 1, 2017** in order to receive a refund of the tuition deposit. I have been notified that **after July 1, there is no refund or applied credit [when class days are decreased] of the June 2018 tuition deposit or Materials/Activity Fee.**

_____ _____
Signature of Parent or Guardian Date