First Methodist Church Enterprise Mom's Day out and Stepping Stones Preschool 2024-2025

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Child's Name			Office Use Only <u>MDO/SSP Class Times</u> Class Time 8:30- 2:30 M-F Lamb (2 mo8 mo) M-FM/T/ThW/F
First	Middle	Last	Kangaroo (9 mo 14 mo.)
Birth Date	Age as of Sept. 1, 2024yrs.	mos.	M-FM/T/ThW/F
Home Address			Bunny (15 mo 22 mo.) M-FM,T,THW/F
City	Zip		Tiger (23 mos 28 mo.) M-FM/T/ThW/F
			Bear (29 mo 35 mo.) M-FM/T/ThW/F
			Duck (36 mo 47 mo.) M-FM/T/ThW/F
			Frog (36 mo- 47 mo) M-F M/T/ThW/F
	Work Phone		Stepping Stones P-K4 (48 mo and up)
Father's Name			Early Care 7:15- 8:30 a.m. (\$35/mo) (for all ages)
Place of Work			Extended Care 2:30-5 p.m.
Cell Phone	Work Phone		(for all ages) M-FM/T/Th W/F
Preferred phone number d	uring school hours		Paid Registration Fee (\$150) (Non-refundable)
Church Affiliation			**We follow the Enterprise City Schools calendar.
Siblings: Name	Age		Schools calendar.
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Persons to be contacted in	CY CONTACT INFORMATION: a case of emergency if parents cannot be rea ver's license or photo I.D. will be required	-	ne loca l who can pick up your
1.) Name			
Phone Number		Relationship	
2.) Name			
Phone Number		Relationship	

3.)	Name	

Phone Number ______ Relationship

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Health Information:

Allergies:		
Other medical conditions of which we should be aw	are:	
Child's Doctor	Phone Number	
My child has permission to be given minor first aid	YESNO	
In the event that none of the persons listed on this r illness or accident, I, who is a minor child Stones Preschool at First Methodist Church Enterpr Mom's Day Out Program and Stepping Stones Pres , to a me consent for any and all necessary treatment when r	, as the parent or guardian of enrolled in either Mom's Day Out or Stepping rise, AL, authorize the Director or teacher of the school to take my child, edical facility for emergency treatment. I give my	I

Parent/Guardian Signature

Date

Parent Contract

I understand that once I turn in this registration form and registration fee that my child is guaranteed a slot. I understand that the registration fee is non-refundable. I agree that I will be responsible for paying August's tuition, unless I notify the Director by June 30th that my child's slot is not needed. I also agree to pay tuition in the form of 10 monthly payments throughout the school year. I understand that tuition payments are due on the 1st of every month, and are considered late after the 10th of the month. I understand that a one-month notice is required for withdrawal. By signing this form, I understand that I am entering a 10- month contract with Mom's Day Out and Stepping Stones Preschool and I agree to the rules stated above and detailed further in the Mom's Day Out and Stepping Stones Preschool Handbook that can be found on our website.

Parent/Guardian Signature	Date

Please place a check mark by the items below to indicate agreement, fill in any blanks and sign at the bottom.

_____, I, ______, give permission for my child ______'s picture to be printed in the newspaper and/or Facebook should the opportunity present itself.

_____, I, _______, give permission for my child ________ to ride in a stroller around the perimeter of the Enterprise First United Methodist Church property with their teachers and classmates. (Applicable only for Lamb, Kangaroo, and Bunny Classes.) (15 mo-21 mo)

____, I, _____, give permission to the staff of Mom's Day Out and Stepping Stones Preschool to apply hand sanitizer to my child's, ______ hands. I understand that the staff cannot be responsible for any allergic reactions or complications resulting from application of hand sanitizer. (Applicable only for the Bunny, Bear, Tiger, Duck, Frog and Bumble Bee classes.) (15 mo-5 yrs).

_____, I, ______, give permission for my child, _______, to walk to the Enterprise Library on a monthly basis. (Applicable only for Mom's Day Out 3s and Stepping Stones Preschool.) (Applicable only for Duck, Frog and Stepping Stones Classes). (3 yrs-5 yrs).

Parent/Guardian Signature

Date

Items needed to complete registration:

- Non-refundable registration fee \$150.00 due at the time of registration
- Notarized form indicating your understanding that we are exempt from state regulations regarding child care programs (forms provided by MDO/SSP during Open House or 1st day of school)
- Up to date Alabama Immunization record. (Imprint Form)
- Child Medical Report