

## Mt. Pisgah Preschool

1100 Mt. Pisgah Drive, Midlothian, Virginia 23113 804-794-1720 • preschool@mtpisgahva.org

## 2023 - 2024 REGISTRATION FORM

Date of Birth:	Age as of 9/30/23	Gender:
Home Address:		(7: 0.1)
(Street)	(City)	(Zip Code)
Subdivision:	Zoned Elementary School	ol:
Child Resides With:	Church Affiliation:	
Mother's Name:	Father's Name:	
Place of Employment:	Place of Employment: _	
First Contact #: H / W / C	First Contact #: H / W /	C
Second Contact #: H / W / C	Second Contact #: H / V	V / C
Primary Email Contact:		
Secondary Email Contact:		
How did you hear about us?		
Current and previous preschool program attend	dance:	
Important developmental/health information th	nat impacts child's participation in presch	ool activities:
Emergency Information:		
Name of Child's Physician:	Phone:	
Allergies:		Emergency medication to be kept at preschool? Yes / No
Persons to be contacted and who have permissi	ion to pick up the above-named child if p	arents cannot be reached:
Name Relati	ionship to Child Ph	none
1		
2		

## **Program, Tuition, and Fees**

\$100/child, \$150/family; To register please submit the registration fee (make checks **Registration Fee:** payable to Mt. Pisgah Preschool) along with this completed registration form. This fee is non-refundable. Your cashed check will serve as confirmation of your child's enrollment in our school. You will receive an enrollment letter mid-spring that will provide the next steps of the enrollment process for the 2023-2024 school year including program placement, documents required for attendance, and back-to-school timeline.

Please indicate your preference for the program in which you would like your child to be enrolled by writing a "1" and "2" in the space next to each class for his/her age group. If only one space is marked it will be assumed that no other choice will be acceptable if that class is filled, and your registration will be returned. Registration fees are otherwise non-refundable. Minimum enrollment is required to maintain the integrity of our program; should any of our programs not maintain minimum enrollment, we reserve the right to change the class offerings. Our 2023-2024 Mt. Pisgah Preschool Parent Handbook will be available at Parent Orientation and detail our specific school year policies and procedures including the school year calendar and observed closures.

Monthly Tuition Installment	Program Selection (Indicate	e preference: "1" and "2")		
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\$220	Two Day 2 ½ yr. old	Tuesday and Thursday		
\$220	Two Day 3 yr. old	Tuesday and Thursday		
\$270	Three Day 3 yr. old	Monday, Wednesday, Friday		
\$330	4 Day Pre-Kindergarten	Monday-Thursday		
\$360	5 Day Pre-Kindergarten	Monday-Friday		
uition Deposit: Equal to one month's tuition installment; due by May 1, 2023 and is non-ref				

fundable. This Tu confirms your enrollment in our program. In fairness to families on our waiting list, please understand that your child may be withdrawn from enrollment at the discretion of the Preschool Director/Council if the Tuition Deposit is not received by the due date. For your convenience, yearly tuition may be broken into monthly installments. Tuition installments are due on the first of each month September 2023 through April 2024.

Activity & Supply Fee: One-time \$100 fee; due by May 1, 2023 and is non-refundable. This fee covers special activities in our program and consumable supplies used throughout the year.

Enrollment is for the school year. If for any reason your child should be withdrawn from our program after the Tuition Deposit has been paid, we require a 30-day written notice, and any installment due within that 30-days

must still be paid. If you do not provide notice, tuition month. If you withdraw on or after March 1, 2024, the		ach
Parent/legal guardian signature acknowledging the information	mation/policies provided in this registration agreemen	t:
Signature	Date	
Birth Certificate Information: All parents must provi by a staff member price	de an <u>original</u> birth certificate for their child to be verifor to the first day of school.	fied
(For Office Use Only) Birth Certificate Number:	Date of Issuance:	
Place of birth:		
Varified by staff member:	Date	