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|-----------------------------|
| Office Use Only             |
| Date of Admission 2025-2026 |
| Teacher _____               |
| Class _____                 |

## Bethany Preschool Enrollment Form 2026-2027

| Child Information |                    |            |              |              |
|-------------------|--------------------|------------|--------------|--------------|
| Last Name         |                    | First Name |              | Nickname     |
| Date of Birth     | Age as of 9/1/2026 |            | Sex<br>M / F |              |
| Home Address      |                    | City/State | Zip Code     | Home Phone # |

| Parent/Guardian Information  |            |  |            |
|--|------------|--|------------|
| List telephone numbers where parents/guardian may be reached while child is in care. |            |  |            |
| Parent/Guardian  |            | Parent/Guardian                        |            |
| Last Name  | First Name | Last Name                              | First Name |
| Home Address (If different from Child)   |            | Home Address (If different from Child) |            |
| E-Mail address   |            | E-Mail address                         |            |
| Cell phone #   |            | Cell phone #                           |            |

| Pick Up List (other than parents)  |               |                                     |
|--|---------------|-------------------------------------|
| I hereby authorize Bethany Preschool to allow my child to leave ONLY with the following persons. Children will be released to a parent or person designated by the parent/guardian after verification of ID. |               |                                     |
| <b>Name</b>  | <b>Cell #</b> | <b>DL/ID# &amp; State Issued By</b> |
| 1.   |               |                                     |
| 2.   |               |                                     |
| 3.   |               |                                     |

| Authorization for Emergency Medical Attention  |          |          |
|--|----------|----------|
| In the event that I cannot be reached to make arrangements for emergency medical, I authorize Bethany Preschool to secure any and all necessary emergency medical care for my child. |          |          |
| Name of Physician:   | Address: | Phone #: |
| Name of Emergency Hospital:  | Address: | Phone #: |

I give my consent for the facility to secure any and all necessary emergency medical care for my child.

X \_\_\_\_\_ Signature of Parent or Guardian



# Parent Tuition & Acknowledgment Form

## Bethany Preschool

### Acknowledgment of Policies and Procedures

(please read, check each box and sign below)

I understand that the policies described in the Parents Handbook contain important information regarding Bethany Preschool. If at any time I have questions regarding these policies or would like to review and discuss them, I should contact the Bethany Preschool Director.

My relationship to Bethany Preschool is voluntarily entered into and is subject to termination by me or the Bethany Preschool staff at will, with or without cause, at any time that either the staff or I believe such action is appropriate. Such termination shall be subject to all the policies relating to termination of services.

I acknowledge that I have received, read and understand the policies contained in the Parent Handbook. I further agree to comply with these policies.

### Tuition Agreement

I agree to make my child's monthly tuition payment. This payment must be received in the Bethany Preschool office by 1:00 p.m. on the 10<sup>th</sup> of every month. Each payment is applied to the following month's tuition.

I understand that a \$15.00 late fee will be charged should my payment be received after the 10<sup>th</sup> of the month. I also understand that I will be charged a \$25.00 insufficient funds fee should my check not clear at the bank. I agree to pay any fees incurred within the calendar month in which they are charged.

X \_\_\_\_\_ Parent / Guardian Signature

**Bethany Preschool admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at this school.**