



**HALF-DAY/FULL DAY PROGRAMS &
TRANSITIONAL KINDERGARTEN
PROGRAM
2017 FALL REGISTRATION FORM**

Office Use Only:

Date Received: _____

Registration fee attached: _____

Class Placement: _____

Jan 30th – Feb 3rd: Currently enrolled families

Feb 6th – 10th: Priority Registration

Please check your priority: WMSUMC ___ Greensboro College ___ Waiting List ___

Feb 13th – Feb 17th: General Public Registration Opens

Please complete all requested information, sign and date the last page.

Child's name: _____
(First) (Middle) (Last)

Address: _____
(Complete address including city and zip code)

Home Phone: (____) ____ - _____ Sex: _____ Date of Birth: ____/____/____
MM DD YY

#1 Parent's Name: _____

Place of Business: _____ Work Phone #: (____) ____ - _____

Cell Phone #: (____) ____ - _____ Pager # (____) ____ - _____ Email: _____

#2 Parent's Name: _____

Place of Business: _____ Work Phone #: (____) ____ - _____

Cell Phone #: (____) ____ - _____ Pager # (____) ____ - _____ Email: _____

Email address for financial information, invoices, receipts etc. _____

The Early Childhood Center strongly supports including children with various needs into our classrooms. To ensure appropriate placement of your child, please answer the following accurately and honestly. Does your child have any special needs? ___ **No** ___ **Yes** If yes, please explain: _____

Does your child currently receive therapeutic services? ___ **No** ___ **Yes** If yes, please explain: _____

Does your child have an IEP or an IFSP? ___ **No** ___ **Yes** If yes, would you be willing to provide us with a copy? ___ **No** ___ **Yes**. Does this child have any other physical /behavioral issues: _____

PLEASE INDICATE YOUR PREFERENCE

INFANT ROOM: (Ages 6 weeks – 12 months). Please indicate your choice of days. Days must be consistent throughout the school year. Parents must register for a minimum of three days. Both mornings and afternoons are available.

AM _____ **9:00AM-1:00PM** **Teacher/Child Ratio=1:4**

Circle Days: M T W TH F

Monthly morning tuition rates are:

3 days per week \$355.00 5 days per week \$549.00
4 days per week \$444.00

PM _____ **1:00PM-6:00PM** **Teacher/Child Ratio=1:4**

Circle Days: M T W TH F

Monthly afternoon tuition rates are:

3 days per week \$355.00 5 days per week \$549.00
4 days per week \$444.00

Please check if you need early care: _____ Before School Care 7:00-9:00AM \$ 107.00

_____ **Full Time including AM, PM and Early Care 5 days per week \$953.00 per month**

TODDLER Room: Children 12 to 24 months old.

Please indicate your choice of days. Days must be consistent throughout the school year. Parents must register for a minimum of three days. Both mornings and afternoons are available.

AM _____ **9:00AM-1:00PM** **Teacher/Child Ratio=1:5**

Circle Days: M T W TH F

Monthly morning tuition rates are:

3 days per week \$338.00 5 days per week \$523.00
4 days per week \$428.00

PM _____ **1:00PM-6:00PM** **Teacher/Child Ratio=1:5**

Circle Days: M T W TH F

Monthly afternoon tuition rates are:

3 days per week \$338.00 5 days per week \$523.00
4 days per week \$428.00

Please check if you need early care: _____ Before School Care 7:00-9:00AM \$ 107.00 Month

_____ **Full Time including AM, PM and Early Care 5 days per week \$897.00 per month**

TWO-YEAR-OLD CLASS: Children who will be 2-years-old on or before August 28th.
 Please indicate your choice of days. Days must be consistent throughout the school year. Parents must register for a minimum of three days. Both mornings and afternoons are available.

AM _____ 9:00AM-1:00PM Teacher/Child Ratio=1:8
 Circle Days: M T W TH F

Monthly morning tuition rates are:

3 days per week	\$309.00	5 days per week	\$481.00
4 days per week	\$391.00		

PM _____ 1:00PM-6:00PM Teacher/Child Ratio=1:5
 Circle Days: M T W TH F

2 days per week	\$309.00	5 days per week	\$481.00
4 days per week	\$391.00		

Please check if you need early care: _____ Before School Care 7:00-9:00AM 107.00 per month

_____ **Full Time including AM, PM and Early Care 5 days per week \$841.00 per month**

THREE-YEAR OLD CLASS: Children who will be 3-years-old on or before August 28th or with administrator's approval.
 Please indicate your choice of days. Days must be consistent throughout the school year. Parents must register for a minimum of three days. Both mornings and afternoons are available.

AM _____ 9:00AM-1:00PM Teacher/Child Ratio=1:9
 Circle Days: M T W TH F

Monthly tuition rates are:

3 days per week	\$296.00
4 days per week	\$370.00
5 days per week	\$454.00

Please check if you need early care: _____ Before School Care 7:00-9:00AM \$107.00 Month

PM _____ 1:00PM-6:00PM Teacher/Child Ratio=1:9
 Circle Days: M T W TH F

Monthly tuition rates are:

3 days per week	\$296.00
4 days per week	\$370.00
5 days per week	\$454.00

_____ **Full Time including AM , PM and Early Care 5 days per week \$810.00 per month**

PRE-K CLASS: Children who will be 4-years-old on or before August 28th. Parents must register for a minimum of four mornings. Both mornings and afternoons are available.

AM _____ 9:00AM-1:00PM Teacher/Child Ratio=1:9

Circle Days: M T W TH F

Monthly tuition rates are:

4 days per week \$370.00

5 days per week \$454.00

Please check if you need early care: _____ Before School Care 7:00-9:00AM \$ 107.00

PM _____ 1:00PM-6:00PM Teacher/Child Ratio=1:9

Circle Days: M T W TH F

Monthly tuition rates are:

4 days per week \$370.00

5 days per week \$454.00

_____ **Full Time including AM, PM and Early Care 5 days per week \$810.00 per month**

Transitional Kindergarten: Children should have completed a four-year-old Pre-K program or turn 5 years old by August 28th or with the administrator's permission. This class is five mornings a week.

PLEASE INDICATE YOUR PREFERENCE

7:00AM-1:30PM _____ Full Day 7:00AM – 6:00PM _____ Teacher/Child Ratio 2:15

Circle Days: M T W TH F

Monthly tuition rates are:

5 days per week (7:00AM-1:30PM) \$516.00

Full day (7:00AM-6:00PM) \$810.00

- Depending on enrollment, ECC reserves the right to create multi-age groupings.
- ECC reserves the right to cancel any class not meeting 60% enrollment by July 15, 2017.

The fee of \$75.00 must be received with this application and is non-refundable once the child's enrollment is confirmed. Your check/payment will be returned in the event your child's enrollment cannot be accepted into our program. Once a receipt of payment for registration is issued it will serve as confirmation of your child's space in the half-day program. **September tuition is due in FULL by June 17, 2017 and is non-refundable.** Enrollment will not be guaranteed if September tuition is not paid by June 17, 2017. ECC may cancel any class not meeting at least 60% enrollment by July 15, 2017.

I understand and accept that:

1. Once my child is accepted into the program the registration fee is non refundable.
2. The first month's tuition is due **June 17, 2017** and will not be refunded.
3. Request to change my child's schedule must be in writing and approved by administration.

Parent/Guardian Print Name _____

Parent/Guardian Signature _____

Date _____