

FELLOWSHIP WESLEYAN PRESCHOOL  
REGISTRATION FORM

**PLEASE COMPLETE BOTH SIDES OF THIS FORM**

Please check session preference:

- \_\_\_\_\_ Three year olds - Tuesday and Thursday mornings  
\_\_\_\_\_ Three year olds - Wednesday and Friday mornings  
\_\_\_\_\_ Four year olds - Monday, Wednesday, and Friday mornings

Please check interest in an extra session:

- \_\_\_\_\_ Three year olds - Monday morning  
\_\_\_\_\_ Four year olds - Thursday morning

\_\_\_\_\_  
Full name of child

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
E-mail Address

May the above information be released for a class list? \_\_\_\_\_

List any allergies your child has: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Full name of father

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Business phone

\_\_\_\_\_  
Full name mother

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Business phone

Please return this form and fee of \$50.00 per family (non-refundable) payable to:

Fellowship Wesleyan Preschool  
P.O. Box 209  
West Seneca, New York 14224  
FELLOWSHIP WESLEYAN PRESCHOOL

## **Agreement Between School and Parents**

As the parent of a child enrolled in the Fellowship Wesleyan Preschool, I have read the information brochure including the school philosophy. I understand and agree to abide by the rules outlined in the brochure. I am aware that these rules have been put into place to ensure that my child's school and classroom function smoothly. My signature below signifies my understanding and agreement.

Signature of parent or guardian

Date

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## **Financial Agreement**

As the parent of a child enrolled in Fellowship Wesleyan Preschool, I have read and understand the financial information in both the "Enrollment" and "Billing" sections under "General Information". Please note that after your child has attended preschool for 3 days tuition is not refundable and you are under contract to continue to pay tuition throughout the year. I have indicated my choice of payment options by circling below:

\*\* If you are choosing an extra morning and there is enough interest for it to be offered, a new Financial Agreement will be mailed with the May Registration Information Packet. Please complete the Financial Agreement without the extra morning figured in.

Signature of parent or guardian

Date

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**2 day 3's program** (by May 15<sup>th</sup> payment of \$95.00)

Choice #1 8 payments of \$95.00 due by the 5<sup>th</sup> of each month. (\$760.00)

Choice #2 2 payments of \$380.00 due on the 1<sup>st</sup> class day in Sept and Jan.

**3 day 4's program** (by May 15<sup>th</sup> payment of \$ 130.00)

Choice #1 8 payments of \$130.00 due by the 5<sup>th</sup> of each month. (\$1,040.00)

Choice #2 2 payments of \$520.00 due on the 1<sup>st</sup> class day in Sept. and Jan.

**4 day 4's program** (by May 15<sup>th</sup> payment of \$ 175.00)

Choice #1 8 payments of \$175.00 due by the 5<sup>th</sup> of each month. (\$1,400.00)

Choice #2 2 payments of \$700.00 due on the 1<sup>st</sup> class day in Sept. and Jan.

**3 day 3's program** (by May 15<sup>th</sup> payment of \$ 130.00)

Choice #1 8 payments of \$130.00 due by the 5<sup>th</sup> of each month. (\$1,040.00)

Choice #2 2 payments of \$520.00 due on the 1<sup>st</sup> class day in Sept. and Jan.