

MOUNTAIN PARK CHURCH PRESCHOOL REGISTRATION 2025-2026

- ❖ Preschool hours are Tuesday Friday 9:30 a.m. 1:30 p.m.
- ❖ Meet the Teacher / Open House is Tuesday, August 12, 2025.
- Our first day of school for the 2025-2026 school year is Wednesday, August 13, 2025.
- The eligibility for classes is determined by the child's age as of **September 1** of the school year. (Example: a child must be 3 years of age on or before September 1, 2025, to enroll in the 3-year-old class.)
- ❖ The availability of all classes is dependent upon enrollment.
- ❖ A registration fee of \$200 is to be paid when a child is registered. This one-time fee is non-refundable and is not the first month's tuition. No registrations will be completed without the required registration fee.
- ❖ Tuition is due the first of each month, August 2025 May 2026.
- The one-time Activity Fee is due with the August tuition payment. This fee covers special events at preschool, including Pumpkin Day, Farm Day, Mom and Dad events, Holiday celebrations, and other fun activities.
- Children in the Ones class must be walking and self-feeding.
- Children must be toilet trained for enrollment in the Threes and Fours classes.
- Students must have a Georgia Immunization Form #3231 on file with the school.
- Sibling discount: \$10.00 off total tuition for 2 children; \$15.00 off total tuition for 3 children.

Class Options, Tuition, and Fees

Select Class	Class Name	# Days per week		N. d. a. sattle le c	One-Time Fees	
			Days	Monthly Tuition	Registration Fee	Activity Fee
	ONES	2	Tues / Thurs OR Wed / Fri	\$225	\$200	\$40
	TWOS	3	Tues / Wed / Thurs	\$250	\$200	\$60
	THREES	4	Tues / Wed / Thurs / Fri	\$285	\$200	\$60
	FOURS	4	Tues / Wed / Thurs / Fri	\$285	\$200	\$60
	FIVES	4	Tues / Wed / Thurs / Fri	\$295	\$200	\$60

Our **FIVES class is for students who will be 5 years old on or before September 1, 2025, and is intended to be a Bridge program between Fours and Kindergarten.

Registration Form 2025-2026

Child's name			
Preferred name to use at school			
Birthdate Se	ex: M/F	Age as of S	Sept 1, 2025
Class: □Ones T/T □Ones W/F □Twos	□Threes	□Fours	□Fives (Bridge program)
Primary Language spoken at home			
Family Information:			
Name (Mom)		_(Dad)	
Phone # (Mom)		(Dad)	
Email (Mom)		_(Dad)	
Home Address:			
City	Zip _		
Names and ages of other children in your ho	me:		
Does your child have allergies? Yes / No	Does the alle		
Other dietary restrictions			
Any evidence of hearing loss, vision difficulti If yes, please explain			
Does your child receive any resource service therapy? Yes / No If yes, please explain	s or interven	tion includi	ng physical, occupational or speech

Do you attend a local church? Yes / No If yes, what church?
How did you learn about our preschool program?
Friend Church member Former student Other
Has your child attended preschool previously? Yes / No If yes, where?
What experience does your child have in playing with other children?
Is there any significant information you might add which would contribute to a better understanding of your child and his/her needs?
What do you hope your child will gain from a year at Mountain Park Church Preschool?
Mountain Park Church Preschool does not discriminate based on race, color, and national or ethnic origin. Mountain Park Church Preschool is not equipped to care for the special needs of physically and/or mentally challenged children. Our program is a not-for-profit ministry of Mountain Park First Baptist Church.
I understand all tuition is due the first of each month (August 2025 – May 2026.) A late fee of \$15 will be charged if not paid by the 10^{th} of the month Parent Initials
Tuition is due even in the case of absences (sickness, vacations, etc.), holidays of any kind, school cancellations due to hazardous weather or unforeseen circumstances Parent Initials
If for any reason you choose to withdraw your child from Mountain Park Church Preschool, a 30-day paid written notice is required Parent Initials
Mountain Park Church Preschool holds the right to dismiss a child from the program to preserve both the integrity of the program and its benefit to others Parent Initials
Parent Signature Date

OFFICE USE ONLY								
Date paid:			Am	nount: \$			Received by:	
Form of pa	yment:	Cash	Check #	#	Online	!		
Class:	Ones T/T	Ones \	N/F	Twos	Threes	Fours	Fives	