# 2022-23 PRESCHOOL Registration

We are so happy that you are interested in joining us at Little Sprouts, and look forward to getting to know your little ones and your families!

#### **Enrollment for Preschool Threes or Fours requires:**

Hello, families

- The following Registration and Emergency Information forms
- A deposit in the form of check/money order
- Photocopies of your child(ren)'s **Birth Certificate** (If this is not immediately accessible, it may be turned in at a later date.)
- Photocopies of your child(ren)'s **Immunization Record**. (If this is not immediately accessible, they can be turned in at a later date.) Families of Preschool children who wish to acquire a waiver for immunizations can do so through the Oakland County Health Department, and must do so prior to the start of the school year. To schedule an immunization waiver education appointment contact Nurse on Call at 1-800-848-5533. Tele-waiver immunization education appointments are available on a limited basis each week.

Completed forms can be returned via mail, or dropped off in person at Central United Methodist Church, Monday through Thursday 9:00 a.m.-3:00 p.m.

## Waterford CUMC Attn: Little Sprouts 3882 Highland Road Waterford, MI 48328

If you have any questions, please feel free to contact us! 248-683-8759

Mary Boynton - Preschool <a href="mboynton59@comcast.net">mboynton59@comcast.net</a>

Monica Hungerford - Family Play Groups hungerfordmonica@gmail.com

### 2022-23 PRESCHOOL Registration

### □ Preschool THREES Tuesday/Thursday @ 9:00-11:30

Child's Name.

Tuition \$1050/year...Deposit of \$150 required with registration (\$50 of which is non-refundable.)

Nine monthly payments of \$100 (cash or check) will be due September 1, 2022-May 1, 2023.

- Preschool FOURS nonday/Wednesday/Friday @ 9:00-Noon

Tuition \$1890/year...Deposit of \$225 required with registration (\$50 of which is non-refundable.)

Nine monthly payments of \$185 (cash or check) will be due August 31, 2022-May 1, 2023.

Ripthdate.

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Child's Home Address:		
Parent/Guardian Name(s	s):	
Contact #:	May we text yo	ou? Y/N
Email Address:		
Photocopies of Birth Certification or brown	plete both the registration and emerge ficates and Immunization Records can be ught to Preschool Parent Orientation rs) and Thursday September 1 (Threes).	submitted
"Little Sprouts" in the mem	a check or money order, payable to (no line. (A fee of \$35.00 must be charged in the tfunds.) Cash payments will be accepted in	event that a
Check #:	Amount: \$	

Thankyou! Your registration will be confirmed via e-mail as it is received!

## 2022-23 PRESCHOOL Emergency Information

Child's Name:	Birthdate:
Child's Home Address:	
Parent/Guardian Name(s):	
Adults with whom my child may be re	
Are there custody restrictions? Y/N	
Emergency Contact #1:	
Emergency Contact #2:	
In the event of an emergency, par contacted. Please indicate below contact and release your child to be reached:	if there are others that we may
Name:	Relationship:
Contact #:	
Name:	
Contact #:	<del></del>
*ALLERGIES or Other Health Concerns	<b>5</b> :
Pediatrician Name:	
*We will contact you for furth your little one safe at school.	ner discussion/Plan of Care to keep

 $\heartsuit$ We look forward to getting to know your Preschooler, and your family! $\heartsuit$