

Graham Emmanuel Baptist Church Preschool
Registration Information
2009-2010 School Year

- School Days:** Preschool classes are held 3 days a week on Tuesday's, Wednesday's and Thursday's. Morning classes meet from 9:30 – 11:30 AM and afternoon classes meet from 12:30 – 2:30 PM.
- 3 / 4 Class:** Children who will be entering Kindergarten in 2011 are enrolled in a 3 – 4 year old class, if completely potty trained.
- 4 / 5 Class:** Children who will be entering Kindergarten in 2010 are enrolled in a 4 – 5 year old class, if completely potty trained.
- Parent Orientation:** A parent orientation meeting will be held on Monday, September 14th, at 7:00 PM. We will go over policies and procedures and give parents the opportunity to turn in health forms and ask questions. Please plan to attend without your child.
- Student Orientation:** On Tuesday, September 15th, there will be a “get acquainted session” for all classes. Morning students and parents will meet from 10:00 – 11:00 AM. Afternoon students and parents will meet from 1:00 – 2:00 PM. Students will learn about their school activities and meet their teachers and classmates. Regularly scheduled classes begin on Wednesday, September 16th.
- Registration Fee:** There will be a \$50 non-refundable registration fee due at the time of registration. This fee will reserve your child's place in class and will help with supplies.
- Tuition:** Tuition is based on an annual fee, which has been broken into 9 monthly payments for your convenience. The annual tuition for each class is \$990, or 9 monthly payments of \$110 each. We will be unable to make adjustments if your child is absent. All tuition payments are due on the first school day of each month.
- Registration:** Please complete the attached registration form and return it with your \$50 registration fee to:

GEBC Preschool
22316 106th Ave E
Graham, WA 98338

Contact Numbers:
253-847-3577 Ext. 107
253-847-8180 Fax

Thank you for your interest in the GEBC Preschool. If you have any questions, please feel free to call us. We are looking forward to an enjoyable year of growing and learning with your child.

4 / 5 class: Cindy Staton, Director/Teacher Karen Duncanson, Teacher Assistant
3 / 4 class: Fray Davis, Teacher Sarah Sweborg, Teacher Assistant

How did you hear about our program?

Graham Emmanuel Baptist Church (GEB) Preschool

Registration Form 2009-2010

AM / PM _____ 3-4 / 4-5

Date: _____

Check: _____ Cash: _____

Student Information

Full Name: _____

First name responds to: _____

Date of birth: _____

Medical

Allergies: _____

Chronic Illnesses: _____

Regular Medications: _____

Specific information you think we should know about child

Child has permission to be released to: (include contact numbers)

Family Information

Home Address: _____

City: _____ Zip: _____

PO Box (if applies): _____

Email Address: _____

Home Phone: _____

Child lives with: _____

Father

Name: _____

Occupation: _____

Emergency Phone: _____

Mother

Name: _____

Occupation: _____

Emergency Phone: _____

Siblings

Names & Ages: _____

MEDICAL CONSENT

In case of medical emergency: After every reasonable effort has been made to contact me, the family physician, or the emergency contact person listed below, I hereby authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by the physician to safeguard my child's health. I waive my right of informed consent to such treatment and agree to be responsible for expenses incurred.

Physician: _____ Phone: _____

Emergency contact person: _____ Phone: _____

Parent/Guardian's signature: _____

Relationship to the child: _____ Date: _____

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Graham Emmanuel Baptist Church's Preschool admits students of any race, color, national or ethnic origin.