



**ACWORTH UNITED METHODIST CHURCH PRESCHOOL  
REGISTRATION FORM  
2021 – 2022 SCHOOL YEAR**

**READ ALL PAPERWORK BEFORE COMPLETING REGISTRATION**

**Registration Fees are Non-Refundable. We accept cash, check or credit card.**

CHILD'S NAME \_\_\_\_\_ Called \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ Subdivision \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

**Are you a member of Acworth UMC?**

\*Each NEW student will receive a tote bag. Please complete tote bag form.  
\*\*\*Additional bags can be ordered for \$10.00\*\*\*

<input type="checkbox"/> New Student * <input type="checkbox"/> Returning Student
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**Classes offered**

**Toddler Class: T/Th (18-23 months by 9-1-21)**

\*Registration: \$200                      Monthly Tuition: \$165 \_\_\_\_\_  
\*Includes supply fee, materials for Bible, Music, and Storytime classes

**Two Year Old Class: T/Th ( 2 years old by 9-1-21)**

\*Registration Fee: \$200                      Monthly Tuition: \$165 \_\_\_\_\_  
\*Includes supply fee, materials for Bible, Music, and Storytime classes

**Two Year Old Class: M/W/F ( 2 years old by 9-1-21)**

\*Registration Fee: \$200                      Monthly Tuition: \$195 \_\_\_\_\_  
\*Includes supply fee, materials for Bible, Music, and Storytime classes

**Three Year Old Class: M/W/F (3 years old by 9-1-21) and **Potty Trained**)**

\*Registration Fee: \$210                      Monthly Tuition: \$195 \_\_\_\_\_  
\*Includes supply fee, materials for STEAM, Bible, and Music classes

**Three Year Old Class: T/Th (3 years old by 9-1-21) and **Potty Trained**)**

\*Registration Fee: \$200                      Monthly Tuition: \$165 \_\_\_\_\_  
\*Includes supply fee, materials for Bible and Music classes

**Three Year Old Class: M-Th (3 years old by 9-1-21) and **Potty Trained**)**

\*Registration Fee: \$210                      Monthly Tuition: \$215 \_\_\_\_\_  
\*Includes supply fee, materials for STEAM, Bible, and Music classes

**Four Year Old Class: M/W/F (4 years old by 9-1-21)**

\*Registration Fee: \$210                      Monthly Tuition: \$195 \_\_\_\_\_  
\*Includes supply fee, materials for STEAM, Bible, and Music classes

**Four Year Old Class: M-Th (4 years old by 9-1-21)**

\*Registration Fee: \$210                      Monthly Tuition: \$215 \_\_\_\_\_  
\*Includes supply fee, materials for STEAM, Bible, and Music classes

**Four Year Old Class: M-F (4 years old by 9-1-21)**

\*Registration Fee: \$210                      Monthly Tuition: \$240 \_\_\_\_\_  
\*Includes supply fee, materials for STEAM, Bible, and Music classes

**Early Five Year Olds: M-F (5 by Dec. 31)**

\* Registration Fee: \$210                      Monthly Tuition: \$240 \_\_\_\_\_  
\*Includes supply fee, materials for STEAM, Bible, and Music classes

**Please indicate your first choice with a #1 and your second choice with a #2, in case your first choice is not available.**

Registration is on a First Come Basis  
**Note: Three Year Olds Must Be Potty Trained**

I have read and understand the Acworth United Methodist Church Preschool 2021-22 Discipline Policy. I have a copy for my files.

Child's Name \_\_\_\_\_

Guardian Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### **DISCIPLINE POLICY**

**The Acworth United Methodist Church Preschool Committee has established a discipline policy. Our objective is to teach children self-control and responsibility. We insist on an orderly environment and the cooperation of the children in our program. We need and desire a positive relationship between home and school. We cannot accept behavior which is distracting, disruptive or which might habitually inflict bodily harm or personal injury to themselves or other children enrolled in our program. When necessary, we employ proven methods (time out, talking with the director) of dealing with unacceptable behavior.**

**In the interest of safety of all, students who injure or endanger themselves or other students (biting, scratching, hitting, etc.) will bring home to their parents a written warning which must be signed by the parent and returned to the preschool director. Following two written warnings, a conference will be held between the parents, teacher, and preschool director, and the parents will be asked not to return their child to school for one week. If a third incident occurs, the parents will be asked not to return the child to school that month. Should a fourth incident occur once the student returns to school, the parents will be asked to withdraw their child for the remainder of the school year. No prepaid tuition will be refunded for time missed, but the child will be allowed to register for the next school year at the same time as returning students. This will assure their place in the program for subsequent school years.**



**ACWORTH UNITED METHODIST PRESCHOOL**  
**4340 COLLINS CIRCLE**  
**ACWORTH, GA 30101**  
**770-975-8754**

**INFORMATION FORM 2021– 2022**

Child's Name \_\_\_\_\_ Called \_\_\_\_\_

Birthdate \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ Home Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

Business Phone \_\_\_\_\_ Cellular \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

Business Phone \_\_\_\_\_ Cellular \_\_\_\_\_

Parents are: Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widowed \_\_\_

If divorced or separated, please describe custody and /or visitation agreement concerning your child as it may pertain to preschool:

\_\_\_\_\_

Please list other people in your home:

Name	Age	Relationship	School Attending
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\_\_\_\_\_

\_\_\_\_\_

Church Affiliation: \_\_\_\_\_

How did you hear about our program? \_\_\_\_\_

Does your child have any non-food allergies? If so, list \_\_\_\_\_ **If an inhaler is necessary, a permission form must be filled out and the inhaler left at school**

Does your child have any food allergies? \_\_\_\_\_ If yes, what food(s)? \_\_\_\_\_  
\_\_\_ Minor allergy \_\_\_ Serious allergy \_\_\_ Parent Preference \_\_\_ Religious reasons \_\_\_ Other

Describe your child's typical reaction to this food. \_\_\_\_\_

Should this food be avoided in all forms and even in small amounts? \_\_\_\_\_

Does your child require the use of an Epi Pen ? \_\_\_\_\_ If yes, **we must have an Epi Pen at the school at all times and a completed form.**

What actions would you like us to take if we observe what appears to be an allergic reaction? \_\_\_\_\_

Any special medical history or needs we should be aware of: \_\_\_\_\_

Do you have concerns regarding your child's speech? \_\_\_\_\_ If yes, has he or she been evaluated? \_\_\_\_\_ If yes, when and where? \_\_\_\_\_

In case of Emergency, please notify (other than parents: these people should be local). These people are authorized to pick up my child in my absence.

1. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

3. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Medical Care Providers to Contact in case of Emergency:

Dr. \_\_\_\_\_ Phone \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone \_\_\_\_\_

I give consent for any member of Acworth United Methodist Preschool, Ministry staff, Church staff, or any qualified medical personnel to act on my behalf in securing and administering necessary emergency medical care and treatment for my child while on church property. If necessary my child should be transported to \_\_\_\_\_ Hospital.

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Parent's Signature

Date

Name of Insurance Company \_\_\_\_\_

Name of Primary Ins. Holder \_\_\_\_\_

Contract or Group Number \_\_\_\_\_

Mailing Address \_\_\_\_\_



Acworth United Methodist Church Preschool  
Information Sheet  
2021-2022

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ (Age as of Sept. 1) \_\_\_\_ yrs. \_\_\_\_ mo.

1. May we include your phone number and address on the class list? \_\_\_\_\_

2. What are your child's interests?

\_\_\_\_\_  
\_\_\_\_\_

3. What group activities is your child involved in? (sports, story time, Sunday School etc.) ? \_\_\_\_\_

4. Does your child have a pet? \_\_\_\_\_

5. Does he/she sleep well at night? \_\_\_\_\_

6. What does your child like to eat? \_\_\_\_\_

7. Does your child take a nap? (Usual time?) \_\_\_\_\_

8. Is your child potty trained? \_\_\_\_\_

9. Is there any particular thing or situation that makes your child anxious?

\_\_\_\_\_

10. What is your child's favorite television show?

\_\_\_\_\_

11. Does your child have a favorite book? \_\_\_\_\_

12. What discipline technique works best with your child at home?

\_\_\_\_\_

13. Primary language spoken at home? \_\_\_\_\_

14. What games does your child like to play? \_\_\_\_\_

15. Has your child had previous preschool experience? If so where and when did they attend? \_\_\_\_\_

16. Is your child right handed \_\_\_\_\_ Left handed \_\_\_\_\_ Unsure \_\_\_\_\_

17. What are your expectations regarding your child's preschool experience at Acworth UMC Preschool?

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18. Do you have any questions for the director or the teacher? If so, please list. \_\_\_\_\_

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Thank you for taking the time to complete the information sheets. We are looking forward to a successful year at AUMC Preschool.