

Registration Form 2010-2011

Spring Valley Presbyterian Church Preschool
125 Sparkleberry Lane, Columbia, SC 29229
803-788-4005

Child's Name _____

Nickname _____ Boy Girl

Age as of 9/1/10 _____ Birth Date _____ Enrollment Date _____

Email Address _____

Do you have a child currently enrolled at SVPCP? Yes No

If yes, child's name _____

Siblings Name _____ Age _____

_____ Age _____

Member of Spring Valley Presbyterian Church? Yes No

Mother's Name _____

Address _____

City _____ Zip _____

Home Phone _____ Cell Phone _____

Occupation/Work Place _____

Work Phone _____

Father's Name _____

Address _____

City _____ Zip _____

Home Phone _____ Cell Phone _____

Occupation/Work Place _____

Work Phone _____

Emergency Contacts (other than parents)

1. Name _____ Phone _____ Relationship _____

2. Name _____ Phone _____ Relationship _____

3. Name _____ Phone _____ Relationship _____

4. Name _____ Phone _____ Relationship _____

Persons allowed to pick up my child

1. Name _____ Phone _____ Relationship _____

2. Name _____ Phone _____ Relationship _____

3. Name _____ Phone _____ Relationship _____

Is there anyone that is **NOT** allowed to pick up your child? Yes No

Name _____ Relationship _____

Allergies _____

Is there anything you would like for us to know about your child? _____

The **Non-Refundable Registration Fee** is equal to one month's tuition. Tuition remains the same regardless of holidays, breaks or absences and is non-refundable upon early withdrawal. Please mark desired class:

	Class	Registration Fee
	4 Year Old - 5 Day	\$205.00
	3 Year Old - 5 Day	\$195.00
	3 Year Old - 3 Day (M, W, F)	\$170.00
	3 Year Old - 2 Day (T,Th)	\$160.00
	Older 2 Year Old – 3 Day (M, W, F) Birthday must fall 9/1/10-2/28/11	\$170.00
	Younger 2 Year Old – 2 Day (T,Th) Birthday must fall 3/1/11-8/31/11	\$160.00

Extended Care Fee - \$5.00 per hour

Child must be Three and Independently Potty Trained

I will use Extended Care ~ 8:00-9:00 AM Occasionally Everyday

12:00-2:30 PM Occasionally Everyday

Photo Release:

Yes No I understand that my child's picture may be taken while at preschool. I give permission for any pictures to be used by the preschool in presentations or publications.

****Please bring an updated SC Immunization Certificate on the first day of school.**

Parent's Signature

Date

For office use only:

Class	Teacher
4 Year Old - 5 Day	
3 Year Old - 5 Day	
3 Year Old - 3 Day (M, W, F)	
3 Year Old - 2 Day (T, Th)	
Older 2 Year Old – 3 Day (M, W, F)	
Younger 2 Year Old – 2 Day (T, Th)	

Immunization Form		Expiration Date~
DSS Form 2900		