



First Presbyterian Church, Seeds of Faith Preschool, Inc.
A Ministry of First Presbyterian Church, Douglasville, Georgia

REGISTRATION FORM, 2009-2010 School Year

Date _____
Child's age as of September 1, 2009 _____
Child's Full Legal Name _____
Preferred Name _____ Sex: M F
Date of Birth _____
Home Telephone _____
Street Address _____
City, State, Zip _____

Mother's Name _____
Work Phone _____ Cell Phone _____
Employer _____ Occupation _____
Father's Name _____
Work Phone _____ Cell Phone _____
Employer _____ Occupation _____

In an effort to cut down on paper, copies, and costs, we will be emailing most communications this year. Please list the email address that is checked daily:

Child Lives with Both Parents _____ Mother _____ Father _____ Other* _____

*Explanation _____

*A copy of any legal papers (custody papers, restraining orders, etc.) must be on file with the Preschool Director.

Names, Ages and Relationship of Others in the Household

Medical Information

Name of Child's Doctor _____ Phone _____

Name of Child's Dentist _____ Phone _____

List any allergies/allergic reactions your child may have:

Other Physical Problems

If your doctor is not available, do we have your consent to use the emergency room at Wellstar Douglas Hospital? _____



In case of an emergency and neither parent can be reached, please give the name and phone number of a relative or friend we may call:

(1) _____ phone _____ relationship _____

(2) _____ phone _____ relationship _____

List any information concerning your child that will be helpful in his/her preschool experience (likes, dislikes, fears, habits, etc)

Has your child had previous experience in a group care situation? _____.

Where? _____ How long? _____



FIRST PRESBYTERIAN CHURCH
SEEDS OF FAITH PRESCHOOL, INC

FINANCIAL AGREEMENT

2009 - 2010

So that you may better understand the financial policies of the First Presbyterian Church Seeds of Faith Preschool, Inc (the "Preschool"), the policies are summarized below for your review. Please read these policies carefully. After reviewing the information, please sign below and return to the Director's office.

1. The registration fee is due upon registration. Your child will not be placed on a class roll until the Director receives the completed registration form and the registration fee.
2. The registration fee is **NON-REFUNDABLE**.
3. Tuition is due on a monthly basis, no later than the 10th day of the current month. The Preschool shall invoice the parents five days after payment is due. These invoices will be due and payable upon receipt. If the tuition is not paid by the 10th of the month, there will be a \$10 late charge added to the amount due. Accounts not paid-in-full by the end of each month shall be cause to terminate enrollment of child.
4. Fees remaining 60 days overdue will be referred to a collection agency. Parents will be required to pay the Preschool all collection costs, including attorney fees. The monies due and owing the Preschool will accrue interest at the rate of 1.5 percent per month or the maximum legal rate permissible in the State or Commonwealth in which the collection services were performed, whichever is larger, on the unpaid balance.
5. Arrangements may be made in a personal meeting with the Director concerning the need for special financial arrangements.
6. If a check is returned to the Preschool due to insufficient funds, the parents will be charged \$25 and asked to pay in cash with the exact amount. We **will not** run the check through the bank again.
7. The Preschool will issue year-end statements of your child's account by written request only.
8. Hours of operation for the Preschool and Mother's Morning Out are 9 a.m. – noon with no extended care offered. A late fee of \$1 per minute will be charged for picking children up later than 12:10 p.m.

I, _____ (please print name), have read and understand these policies and agree to abide by them.

Signature

Date



FIRST PRESBYTERIAN CHURCH
SEEDS OF FAITH PRESCHOOL, Inc.
LIABILITY RELEASE/SPECIAL POWER OF ATTORNEY FORM

Child's Name _____
Address _____

Child's Date of Birth _____
Known Allergies _____
Health Insurance Company _____
Policy Number _____
Emergency contact name and number (1) _____
Emergency contact name and number (2) _____

The undersigned, (being 21 years of age or older) do hereby release, forever discharge and agree to hold harmless the Preschool and its Directors thereof from any and all liability, claims, or demands for personal injury, sickness, or death, as well as property damage and expenses, of any nature whatsoever, which may be incurred by the undersigned that occur while said child is participating in the above-described activity.

Furthermore, the undersigned hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of participation in recreation, transportation, and work activities involved therein.

Further, authorization and permission is hereby given to the Preschool to furnish any necessary transportation, food, or other needs to this participant.

The undersigned further hereby agree to hold harmless and indemnify the Preschool, its directors, employees, and agents, for any liability sustained by the Preschool as the result of any negligent, willful, or intentional acts of said participant, including expenses incurred attendant thereto.



IF THE PARTICIPANT HAS NOT YET ATTAINED THE AGE OF 21 YEARS:

The undersigned hereby grant permission to take said child to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery of medical treatment, and assume the responsibility of all medical bills, if any. Further, should transportation costs be involved, the undersigned will assume all costs.

The Preschool may generally do and perform all things necessary in or about the premises as fully and effectually in all respects as I could do if personally present.

This release applies to all activities for the year 2009-2010.

_____	_____
Father's signature	Date
_____	_____
Mother's signature	Date
_____	_____
Legal Guardian's signature	Date