



Love.

Learn.

Grow.

2023-2024  
 Red Bank UMC Preschool  
 2909 Old Barnwell Road, Lexington, SC 29073  
 Phone: (803)359-0329 Email: [preschool@rbumc.com](mailto:preschool@rbumc.com)  
 RBUMC.COM  
 Fax: (803)957-2259

Office Use	
<input type="checkbox"/>	Fee Agreement & Parent Pledge
<input type="checkbox"/>	Registration Fee
<input type="checkbox"/>	Immunization
<input type="checkbox"/>	Birth Certificate
<input type="checkbox"/>	General Health Form

### General Information

Child's Name:		
Date Of Birth:	Age on Sept 2023:	
Address: City, State, Zip		
Please place a checkmark by the class(es) in which you wish to enroll your child *Child must attain age below before Sept. 1 <sup>st</sup> 2023. All classes are 5 days for ages 2-4 <input type="checkbox"/> Loving Beginnings: Parent's Morning Out Infants (6 weeks – 18 mos ) <input type="checkbox"/> 3 Days or <input type="checkbox"/> 5 Days <input type="checkbox"/> Toddler 18 mos – 30 mos <input type="checkbox"/> 3-Year-Old Class <input type="checkbox"/> 4-Year-Old Class <input type="checkbox"/> Early Bird Drop-Off (7:15-8:15 AM \$10.00 a day or \$70 for the month, M-F for ages 2-4) <input type="checkbox"/> Lunch Bunch (12:00-2:00 PM \$10.00 a day or \$130.00 for the month, M-F for ages 2-4) <input type="checkbox"/> After School Rollover (2:00-6:00 PM \$70 a week, M-F for ages 6 weeks – 4)		
Email:		
Home Phone:	Mother's Cell:	Father's Cell:
Parent(s) Names:		
Mother's place of employment and work number:	Father's place of employment and work number:	
Names and ages of siblings living in the home:	What experience do you expect your child to gain from the RBUMC program?	
Please add my name to the sub list. I am available to sub on the following day:	I would like to assist with special events at school and with the parents club:	

### Child's Health Record (Please attach a copy of immunization records)

Food Allergies:	Other Allergies:
Please circle any recurring problems your child may have: <b>Heart Trouble</b> <b>Strep Throat</b> <b>Ear Infections</b> <b>Asthma</b> <b>Bronchitis</b> <b>Croup</b> <b>Other:</b> _____	Please circle any illness your child has had: <b>Chicken Pox</b> <b>Red Measles</b> <b>German Measles</b> <b>Rheumatic Fever</b> <b>Scarlet Fever</b> <b>Mumps</b>
When was your child potty trained?	Does your child have any fears?

**Child's Health Record (Please attach a copy of immunization records) Cont.**

Does your child have any medical situations or other problems that we should be aware of?

What do you do at home to comfort your child?

Name of phone number of child's doctor:

I have attached a copy of my child's immunization record:

**Yes**, current record is attached

**No**, one will be provided before the beginning of the year

**Authentication for Emergency Information**

I hereby grant permission for any staff person from the preschool at Red Bank UMC Preschool to take whatever steps may be necessary to obtain emergency medical treatment for my child, \_\_\_\_\_. These steps include, but are not limited to the following:

- Attempt to contact parent or guardian
- Attempt to contact the child's physician
- Attempt to contact the parent through any of the person's listed below
- If we cannot contact you, we will call an ambulance OR have the child taken to the Emergency Room at Lexington Medical Center in the company of a staff person in his/her personal vehicle.

I also understand that I am responsible for any resultant medical treatment expenses.

**Emergency Contact Information When Parents Can Not be Reached**

1. Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

2. Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

**Parent/Guardian  
Signature:**

**Date:**

**Authorization for Release**

If my child is to be picked up by anyone other than myself or spouse, I will notify the teacher in writing or in the case of emergency will call the Preschool. I understand that anyone listed below may pick up my child provided the school has been notified by my spouse or by me. These individuals must provide a picture ID.

**Other Authorized People**

1. Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Authorization for Release continued**

Primary Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

2. Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

<b>Parent/Guardian Signature:</b>	<b>Date:</b>
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**Photo and Video Release**

We take a lot of pictures here at RBUMC Preschool. We use these in creating bulletin boards, photo albums, educational projects, and more to show kids having fun, playing, and learning. We would like your permission to photograph/videotape your child for use in these projects.

I hereby (give/do not give) my permission for any photo/video to be used for marketing, to include but not limited to: albums, bulletin boards, advertisements, etc. for the discretionary use for Red Bank UMC Preschool.

<b>Parent/Guardian Signature:</b>	<b>Date:</b>
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**Address and Phone Number Release**

By signing below, I grant RBUMC Preschool permission to publish and distribute my child's name, address, birth date, phone number, and email address in a Parent Club Preschool directory for preschool parents.

<b>Parent/Guardian Signature:</b>	<b>Date:</b>
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Age	Days	Monthly Tuition/Fee	Registration Fee
6 wks-18 mos	Choose 3 or 5 days Mon-Wed or Mon-Fri	\$230.00 3 Days \$270.00 5 Days	\$150.00
18 mos – 30 mos	Choose 3 or 5 days Mon-Wed or Mon-Fri	\$230.00 3 Days \$270.00 5 Days	\$150.00
2 Years	5 Days	\$270.00	\$150.00
3 Years	5 Days	\$270.00	\$150.00
4 Years	5 Days	\$270.00	\$150.00
Early Bird 7:15-8:15 AM (2s, 3s, & 4s)	1 Day Drop in	\$10.00	N/A
Early Bird 7:15-8:15 AM (2s, 3s, & 4s)	Monthly	\$70	N/A
Lunch Bunch 12:00-2:00 PM (2s, 3s, & 4s)	1 Day Drop in	\$10	N/A
Lunch Bunch 12:00-2:00 PM (2s, 3s, & 4s)	Monthly	\$130.00	N/A

**Registration Fee-** \$150.00 due at time of registration to confirm enrollment. **REGISTRATION FEE IS NON-REFUNDABLE**

**Monthly Tuition-** Tuition for students of all ages is for 5 days is \$270 monthly. Tuition for students in the infant/toddler class for 3 days is \$230.00 monthly. **Tuition is to be paid by the 1<sup>st</sup> of each school month, no later than the 5<sup>th</sup>.** Family discounts are offered as follows: First child is full price, second (or more) child is \$240.00 rather than \$270.00 for those enrolled in 5 days or \$210 rather than \$230 for those enrolled in 3 days. Red Bank United Methodist Church member (parent or legal guardian) receive \$40.00 off of monthly tuition (\$230.00 for 5 Days or \$190 for 3 Days)

**Early Bird Payment-** Due 1<sup>st</sup> of each school month. If you only need 1 day without notice pay \$10.00 via money envelope in daily folder the day of.

**Lunch Bunch Payment-** Due 1<sup>st</sup> of each school month. If you only need 1 day without notice pay \$10.00 via money envelope in daily folder the day of.

**Late Payment-** A late fee of \$10.00 will be added to tuition if not paid by the 5<sup>th</sup> of the month.

**Returned Check-** Deposited for goods and services rendered are received a **\$25.00** will be charged and payment on the check and fee will be required in cash or money order within 15 days of initial phone contact.

Failure to pay your student's tuition more than 5 days past the due date, written notification will be given to the parents(s) and/or legal guardian. If the tuition is not satisfied or arrangements have not been made with the

Preschool Director before 15 days past the due date, Red Bank UMC Preschool reserves the right to forfeit that child's space in the program on the 16<sup>th</sup> day and all past due accounts must be paid in full.

**Late Pick Up-** Please note that there is a late fee assessed for each minute (\$1.00/1 minute) that staff is required to stay beyond 12:20 PM on our time clock.

**Fee Agreement**

I have read the fee agreement for the 2023-2024 school year and understand that I am obligated to pay all fees as listed within the time frame listed. Tuition payments are due on the 1<sup>st</sup> day of each month. If the 1<sup>st</sup> is a holiday, then I must ensure that my payment is received by the 5<sup>th</sup>. If my child is withdrawn, I am responsible for all monthly fees for the month of my written notice of withdrawal is given to the office. I understand that all fees including registration and tuition is nonrefundable.

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Signature of Parent or Guardian

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Date

## **RBUMC Preschool Parent Pledge**

Our goal is to introduce and nurture the Christian faith in young children, to assist families in providing the best opportunities for emotional, physiological, and spiritual growth in their children, and to prepare little minds for kindergarten and beyond.

### **I am aware of the following:**

Red Bank UMC Preschool is a Christian school and is a ministry of Red Bank United Methodist Church.

Children registering for a 3-year-old and above class **MUST** be potty proficient. If my child is in a 3-year-old classroom or above and is not potty trained, my assistance will be required in my child's classroom.

The first day of school for 2023-2024 is Tuesday, Sept. 5<sup>th</sup> 2023 and the last day of school is Friday, May 17<sup>th</sup> 2024.

All students are required to have an up to date immunization form on file. Religious exemption forms are not accepted.

### **I pledge to support Red Bank UMC Preschool in the following ways:**

If my child has food allergies or if I have dietary concerns, I will notify my child's teachers of such in writing, and I will send my child's snack if deemed necessary.

I will share pertinent health information about my child with my child's teacher in writing. I may be asked to provide information from my child's doctor in the event of a medical concern.

I will follow RBUMC Preschool's health policy, and I will not knowingly send my child to school when they are sick.

If I have concerns, I will discuss them with my child's teacher first. If concerns or issues are not addressed in a responsible time frame, I will then contact the Preschool's Director.

I will respect the privacy of the preschool families.

I will pay my tuition on the first of each month, and I will pay a late fee of \$10.00 if my tuition is paid after the 5<sup>th</sup> of the month. I understand that if the payment is not made by the 15<sup>th</sup> of the month, the student's spot may be forfeited.

**I have read and agree to the information stated above in the Parent's Pledge**

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

\*This information will also be included, in detail, in the Parent Handbook.