

# Tree City Preschool

United Methodist Church of Kent  
1435 East Main Street  
P. O. Box 646  
Kent, OH 44240  
330.673.5879 x16

January 15, 2013

Dear Parents:

Thank you for your interest in Tree City Preschool. We offer classes for children ages three or young four, and classes for children ages four or young five. We are happy to send this information about our programs.

If you wish to enroll, please fill out the attached registration form and return it to the address listed above. A **non-refundable** registration fee equal to one month's tuition must accompany the registration form in order for the application to be processed. This fee will be applied to your child's tuition for May of 2014.

We are offering two separate programs next fall. The morning class meets from 9:00 to 11:15 and the afternoon class from 12:15 to 2:30. The cost of each program is \$120.00 per month. Lunch option is available with either of these programs. The times, including lunch option, are 9:00 to 12:00 or 11:30 to 2:30. The cost for a program with lunch option is \$160.00 per month. An All Day program option is also available. Children in this program would remain from 9 AM to 2:30 PM. The All Day cost is \$280.00 per month. All classes are held on Tuesday, Wednesday and Thursday of each week. Every effort will be made to place your child in the class you request. However, placement in the classes is also based on specific student/parent needs and class homogeneity. The final class placement is determined by the director. All students attending Tree City Preschool must be toilet trained.

If you enroll, you will receive further information about the 2013-2014 school year in August. Please contact Judy Dobbins at 330.673.7921 (home) or 330.673.5879 x16 (school) if you have any questions. Additional copies of this letter, application and other necessary form are available on our website, [treecitypreschool.org](http://treecitypreschool.org).

Sincerely yours,

Judith P. Dobbins, Director  
Tree City Preschool

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Child's Full Name \_\_\_\_\_ Birth date \_\_\_\_\_  
Name to be used at school if different \_\_\_\_\_ Sex \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_\_\_ E-mail address (optional) \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation/Employer \_\_\_\_\_  
Business Address \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
Home Address (if different) \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation/Employer \_\_\_\_\_  
Business Address \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
Home Address (if different) \_\_\_\_\_ Cell Phone \_\_\_\_\_

Marital Status of Parents: Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Single \_\_\_ Widowed \_\_\_ Other \_\_\_

Other members in the household: Relationship: Age:

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

Please list anyone else involved in rearing your child and give relationship (nanny, babysitter, grandparent, etc.)

\_\_\_\_\_  
Name **ALL** persons authorized by you to pick up your child from preschool \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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History of development that might be helpful for us to know (premature birth, serious illnesses or accidents, physical difficulties, special fears, etc.) \_\_\_\_\_

Describe your child's general health: \_\_\_\_\_

Food allergies: \_\_\_\_\_

Other allergies: \_\_\_\_\_

Explain any special difficulties such as speech, hearing, or any chronic physical problem we need to be aware of:

Is there a language other than English spoken at home? \_\_\_\_\_ What is it? \_\_\_\_\_

What kinds of group experiences has your child had?

Describe how your child interacts with other children: \_\_\_\_\_

Describe your child's favorite toys, activities, etc.: \_\_\_\_\_

How can our school best help your child? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All students attending Tree City Preschool **must** be toilet trained.

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Which program are you interested in?

A. **Nursery School** ----- 3's and young 4's

Morning (9:00 – 11:15 A.M.) \_\_\_\_\_

Afternoon (12:15 – 2:30 P.M.) \_\_\_\_\_

Lunch Option \_\_\_\_\_

B. **Prekindergarten**-----4's and young 5's

Morning (9:00 – 11.15 A.M.) \_\_\_\_\_

Afternoon (12:15 – 2:30 P.M.) \_\_\_\_\_

Lunch Option \_\_\_\_\_

All Day (9:00 – 2:30) \_\_\_\_\_

Tuition Cost: Morning or Afternoon Session: \$120.00 per month / \$1,080.00 per year

Lunch Option: \$40.00 per month / \$360.00 per year

All Day: \$280.00 per month / \$2,520.00 per year

Full tuition is divided into nine equal payments of which the first payment is the registration fee. **The registration fee must accompany this form in order for registration to be valid.** This fee is non-refundable. The remaining eight payments are due on the first day school is in session each month beginning in September and ending in April. Please sign below to indicate that you understand these conditions:

Signature \_\_\_\_\_ Date \_\_\_\_\_

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A class contact list will be prepared for class members' families at the beginning of the year. This contact list will be made available only to the members of Tree City Preschool. For this to be made available, you need to sign and date the following permission:

I **do** \_\_\_\_\_ **do not** \_\_\_\_\_ give permission for parent names and phone numbers to appear on the class contact list that will be available to other class members on request.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I **do** \_\_\_\_\_ **do not** \_\_\_\_\_ give permission for my child to go on supervised walks on church property throughout the school year.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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DATE ADMITTED \_\_\_\_\_ PAYMENT \_\_\_\_\_

CLASS \_\_\_\_\_