



## 2022-2023 2 YEAR OLD REGISTRATION FORM

**Child's Name:** \_\_\_\_\_  
First
Middle
Last

**Name Teacher Should Call Your Child:**  
 \_\_\_\_\_

**Birth Date:** \_\_\_\_\_

**Sex:** Boy \_\_\_\_\_ Girl \_\_\_\_\_

**Program Choice (Please indicate 1st and 2nd choices)**  
 Tues/Thurs 9:00am - 1:00pm \_\_\_\_\_  
 Mon/Wed/Fri 9:00am - 1:00pm \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Employed by: \_\_\_\_\_  
 Phone (Cell): \_\_\_\_\_  
 Phone (Work): \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Employed by: \_\_\_\_\_  
 Phone (Cell): \_\_\_\_\_  
 Phone (Work): \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

Does the child live with both parents? \_\_\_\_\_

Other members of the household:

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Has the child had previous school experience?** \_\_\_\_\_  
 If yes, please list name of school(s) \_\_\_\_\_  
 \_\_\_\_\_

**How did you learn of our school?**  
 \_\_\_\_\_

**For Office Use Only**

**Reg Date:**            \_\_\_/\_\_\_/\_\_\_  
W/D Date             \_\_\_/\_\_\_/\_\_\_  
Notes:                    \_\_\_\_\_

**Amt. Received:**         \$  
**Payment:**             \_\_\_ Check/Cash            \_\_\_ MC/Visa  
Notes:                    \_\_\_\_\_

**Student Information**  
*Providing detailed information to the questions below will allow our teachers to work more effectively with your child. All information provided is kept in the strictest confidence.*

**1) Physical Restrictions/Chronic Medical Conditions**  
 \_\_\_\_\_

**2) Dietary Restrictions or Food Allergies**  
 \* My child has a restricted diet and cannot eat: \_\_\_\_\_  
 \* My child is allergic to the following and cannot eat: \_\_\_\_\_

\* My child has a diagnosis of anaphylaxis: \_\_\_\_\_  
**If your child has a diagnosis of anaphylaxis, you must complete a Food Allergy Action Plan to be kept in the classroom.**

**3) Developmental Information**  
 My child is in the Infants and Toddlers Program: \_\_\_\_\_

My child has been screened by Childfind: \_\_\_\_\_

I have concerns regarding my child's: (check all that apply)  
attention span
speech
motor skills
activity level

If yes to any of the above, please explain in further detail:  
 \_\_\_\_\_

**4) Language Spoken at Home:**  
 Does child speak English? \_\_\_\_\_  
 If not, what languages does your child speak? \_\_\_\_\_

**5) Please provide any information about your child that may be helpful to the teacher.**  
 \_\_\_\_\_

### Tuition Rates:

**2 Year Olds - Tues/Thurs, 9am - 1:00pm - \$320.00**  
**2 Year Olds - Mon/Wed/Fri, 9am - 1:00pm - \$365.00**

A registration fee is required to hold your child's place in our school. The fee is \$85 plus May 2023 tuition. There will be no refunds for any reason.

**Complete and sign:**

I give permission for my child to participate fully in all of the activities and programs conducted by the Epworth Preschool & Kindergarten.

Parent Signature: \_\_\_\_\_  
 Submission Date: \_\_\_\_\_



PRE-SCHOOL & KINDERGARTEN

1 John 4:16 God is love

**Epworth Preschool and Kindergarten**  
*Building the Foundations of Learning for over 30 Years, Established 1981*

9008 Rosemont Drive  
Gaithersburg, Maryland 20877  
(301) 977-3421

## **Financial Agreement**

- **The \$85 registration fee is non-refundable.**
- **May 2023 tuition paid at registration is non-refundable and will not be applied to any other month.**
- **Tuition is due the 1<sup>st</sup> of each month. There is a \$10.00 late fee that will be assessed if the tuition is not paid by the 5th of the month.**
- **If a parent is late picking up a child at 1:00 p.m., they will be charged a late fee of \$1.00 per minute for every minute they are late.**

**I have read and understood the above. I agree to all  
the terms of the Financial Agreement.**

\_\_\_\_\_  
**Parent/Guardian Signature**

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

\_\_\_\_\_  
**Parent/Guardian Name Printed**

\_\_\_\_\_  
**Date**