



Little Promises Preschool
1305 Hulseley Road
Carthage, NC 28327

OFFICE USE

School Year: _____

Class: _____

Enrollment Date: _____

Graduation/Termination Date: _____

Child Information

First Name: _____ Last Name: _____ M.I.: _____ Nickname: _____

Birthdate: _____ Gender: _____ Child's Age on 8/31/21 : _____

Home Address: _____

Allergy/ Medical Concerns: _____

Child's Previous Year: ____ Little Promises ____ At Home ____ Daycare Other: _____

Family Information

Mother/Guardian Name: _____ Phones: _____

Home Address: _____ Home: _____

Employer: _____ Position: _____ Cell: _____

Email Address: _____ Work: _____

Father/Guardian Name: _____ Phones: _____

Home Address: _____ Home: _____

Employer: _____ Position: _____ Cell: _____

Email Address: _____ Work: _____

Custody:

Does the child live with both biological parents who share primary custody of the child? _____

If no, please explain your family dynamic below: _____

Siblings: (Please list first names and ages)

Home Church: _____ How did you hear about Little Promises: _____

Some of our preschool communication will come digitally through email. Please make sure that you have a current email listed and please regularly check your email account.

Which parent(s) would like to receive emails and updates? _____

Would you be interested in volunteering or subbing at the Preschool? _____

Emergency Contacts and Authorized Pick Up List

Primary Drop Off and Pick Up Person:

Name: _____ **Relationship:** _____ **Phone Number:** _____

In case of emergency (when the parent/guardians cannot be reached) I authorize Little Promises Preschool to contact the below listed individuals:

Name: _____ Phone Number: _____

Relationship: _____ Authorized Pick Up: _____

Name: _____ Phone Number: _____

Relationship: _____ Authorized Pick Up: _____

In addition to the individuals listed above, my child may also be released to the following individuals:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Notices and Permissions

I authorize permission for Little Promises employees to photograph my child. My child's photograph will be taken for the purpose of – a closed group in which access is only granted to family members of children within the class, for slideshows during Little Promises and church events and for advertising purposes.

My child's name will NOT be printed or otherwise revealed in connection with the image(s) in advertising purposes and pictures will only be taken during the activities within our program.

Consent for school use: _____ YES _____ NO

Consent for advertising purposes: _____ YES _____ NO

Signature: _____ **Date:** _____

I give permission for my child to ride the New Covenant Fellowship (NCF) Bus or Van. I release NCF and individuals from liability in case of accident as long as normal safety procedures have been taken. I will be notified prior to my child riding in the bus or van.

Signature: _____ **Date:** _____

I authorize permission for Little Promises employees to provide basic first aid on behalf of my child. This includes applying antibiotic ointment, diaper rash cream/vaseline, and other simple first aid treatments. *Little Promises employees will not give medication to any students without written consent from a parent.*

Signature: _____ **Date:** _____

In the event that my child requires emergency medical care, and a parent/guardian cannot be reached, I authorize permission for all medical and surgical treatment or procedures as may be performed or prescribed by the attending physician and/or paramedic for my child and waive my right to consent of the treatment.

Signature: _____ **Date:** _____

Preferred Emergency Medical Facility: _____

Medical Insurance: _____ **Group/Policy Number:** _____

Tuition Fees and Agreement

2021/2021 Little Promises Tuition Rates

Current Student Reenrollment Fee - \$60

New Student Registration Fee - \$100

PreK4 Classroom (Mon-Thurs) \$225 monthly

PreK3 Classroom (Mon-Thurs) \$225 monthly

2s Classroom (Mon-Thurs) \$225 monthly

2s Classroom (Mon/Wed or Tues/Thurs) \$175 monthly

10% discount on the lesser tuition for siblings

The 2s Classroom is our program for our youngest kids. Students must be 2 years of age upon enrolling for the program (by December 31st). In order to enter the PreK3 and PreK4 classes, the child must be the given age by August 31st. This means that some of our two year old friends who enroll later in the year repeat the twos classroom the following year before moving up.

Student Name: _____ **Class:** _____ **Monthly Rate:** _____

Tuition for Little Promises is due on the first school day of each month, September through May. If a payment is not made, after a five day grace period, and a notification, a late fee of \$10 will be applied to your child's account. Consistent late or a missed payment, may result in your child's dismissal from the program. Our office is willing to work with families who have found themselves in a hardship; however, proactive communication is necessary on your part for us to be able to come up with a plan together.

Outside of tuition, your family is responsible for the registration fee, supply list items, providing snack on a rotating schedule and paying field trip fees.

By signing below, we agree to make all payments in a timely manner, communicate if we face a hardship, and supply additional required items including snack and supply list items.

Signature: _____ **Date:** _____