



A Child's Place Registration Form 2026-2027

Farmington Heights Church
910 Raleigh Rd Wilson, NC 27896
252-291-0696 Ex 17

STUDENT INFORMATION:

Child's Full Name _____

Name to be called/written at school _____

Date of Birth _____

Gender _____ Male _____ Female

Address _____

Primary Phone _____

PARENT INFORMATION:

Father's Name _____

Mother's Name _____

Address _____

Address _____

Cell Phone _____

Cell Phone _____

Work Phone _____

Work Phone _____

Email _____

Email _____

Employer _____

Employer _____

Siblings and Ages _____

Church Affiliation _____

PICK UP INFORMATION:

Name of person authorized to pick up child if neither parent can be reached:

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

MEDICAL INFORMATION:

Medical or development issues we need to know about (allergies, hearing, eyesight, speech, behavior, etc.)

Physician's Name _____

Physician's Phone _____

In case of emergency, I give permission for my child to receive treatment as required.

Parent Signature

Date

REGISTRATION:

Children must turn 1, 2, 3, or 4 on or before August 31st to enroll in their respective class.

Please check the class below you would like to enroll your child in:

<u>Class</u>	<u>Days</u>	<u>Registration Fee</u>	<u>9 Monthly Payments</u>	<u>Check <input type="checkbox"/> Choice</u>
1 year olds	Mon & Wed	\$125.00	\$125.00	
1 year olds	Tues & Thurs	\$125.00	\$125.00	
1 year olds	Mon -Thurs	\$240.00	\$240.00	
2 year olds	Mon & Wed	\$125.00	\$125.00	
2 year olds	Tues & Thurs	\$125.00	\$125.00	
2 year olds	Mon - Thurs	\$240.00	\$240.00	
3 year olds	Mon - Thurs	\$180.00	\$180.00	
3 year olds	Mon - Fri	\$200.00	\$200.00	
4 year olds	Mon - Thurs	\$180.00	\$180.00	
4 year olds	Mon - Fri	\$200.00	\$200.00	

EARLY DROP OFF: Early drop off is offered every school day at 8:15am.

The cost is \$5.00 per day for drop-ins (24 hour advance notice emailed to bdavis@farmingtonheights.com is required) or you may pay monthly at the discounted rate.

Please check below if you will need early drop off each morning:

<u>Days/Week</u>	<u>Monthly Fee</u>	<u><input type="checkbox"/></u>
2	\$35.00	
3	\$50.00	
4	\$65.00	
5	\$80.00	

In completing this application parent agrees to the following:

1. The registration fee is a one-time nonrefundable fee due at time of registration.
2. Tuition is paid September through May. Annual tuition is broken into nine equal payments and is not based on the number of days attended each month.
3. Tuition is due on the 1st of each month and is late on the 5th. A \$10.00 late fee will be charged for tuition payments not received by the 5th of each month.
4. Annual Tuition must be paid in full unless the child moves out of the Wilson area or due to prolonged illness.

Parent Signature

Date

A Child's Place
Publication Waiver
Consent for children & employees

I understand that any activities of A Child's Place at Farmington Heights are subject to be photographed or videoed by electronic equipment. I grant Farmington Heights permission to use a photograph, video image or any other representation for the expressed purpose of publication on the church website, face book, or in any other church related media. I voluntarily relinquish all rights to the photograph, image or other representation.

Further, I release Farmington Heights, as well as other parties authorized by the church to use the photograph, image or other representation, from all liability.

Child's Name _____

_____Signature _____Date