

Date of Admission: _____

APPLICATION FOR 2024-25 ENROLLMENT

Office use:

Stonebridge United Methodist Church

Class: _____

Date of Withdrawal: _____

SUNSHINE KIDS PRESCHOOL

Check # _____

1800 S. Stonebridge Drive McKinney, Texas 75072

Date: _____

Phone: 214-726-0578 sunshinekids@mysumc.org

Amount: \$ _____

Child's Name: _____

Last

First

Middle

Birth Date: ____/____/____ Sex: _____ Name child is called: _____
Month Day Year

Home Phone: _____ Address: _____
Area Code Number Street City Zip Code

Mother's Name: _____ Father's Name: _____

Mother's Email: _____ Father's Email: _____

Mother's Cell Phone: _____ Father's Cell Phone: _____

Mother's/Father's Employer: _____ / _____

Mother's/Father's Address (if different from above): _____

AGE AS OF September 1, 2024

**Registration/Supply fee
Non-Refundable**

**Monthly
Tuition**

(Please select a 1st and 2nd choice) All classes are 9:00 am to 2:00 pm.

MDO:

18 - 23 mos. Mother's Day Out

_____ Tuesday/Thursday \$290 \$290
_____ Wednesday \$185 \$185

Early Preschool (2 years by September 1st)

_____ Tuesday/Thursday \$270 \$270
_____ Tuesday/Wednesday/Thursday \$345 \$345

Preschool (3 years by September 1st)

*Child must be potty trained (must be able to take care of **all** bathroom needs)

_____ Tuesday/Thursday \$270 \$270
_____ Tuesday/Wednesday/Thursday \$345 \$345
_____ Monday through Thursday \$415 \$415

Pre-Kindergarten (4 years by September 1st)

_____ Monday through Thursday \$415 \$415
_____ Tuesday/Wednesday/Thursday \$345 \$345

Transitional Kindergarten

(5 years by September 1)

_____ Monday through Thursday \$425 \$425

Signature of Parent or Legal Guardian

Date

_____ **Yes**, our family is a member of Stonebridge United Methodist Church. _____ (mo. & year joined)

_____ **No**, our family is not a member of Stonebridge United Methodist Church.

_____ Our family would like information about the Church and Sunday School programs at Stonebridge.

Religious Affiliation: _____

NAMES AND BIRTH DATES OF OTHER CHILDREN IN THE FAMILY:

INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF YOUR CHILD:

List any allergies (food or medication) or medical conditions such as asthma, etc.

Sunshine Kids Preschool provides ***Peanut/Nut Free*** classrooms for children with allergies. No peanuts or nut products are allowed in these classrooms. **Would you be willing to place your child in a *peanut/nut free* classroom?**

If your child is a returning SK student, which class were they in last year? _____

What diagnosed special needs does your child require in order to participate in class/group activities? _____

Has your child been professionally tested or evaluated? N/A YES NO
If YES, by whom: _____

Has your child attended another Preschool/PDO or Nursery Care? YES NO
If YES, please list all: _____

With whom does the child reside: _____

Special Requests: _____

PLEASE READ BEFORE SIGNING:

The Registration/Supply fee and this form must be returned to the school office. The Registration/Supply fee is NOT refundable. The Registration/Supply fee does NOT apply toward the month's tuition. Tuition is due the first of each month. There are no statements sent out unless delinquent. Make checks payable to Sunshine Kids Preschool.

I understand and agree that the Sunshine Kids Preschool reserves the right to terminate the enrollment agreement for the following:

1. End of school year;
2. My failure to resolve any delinquency in tuition;
3. The Preschool is unable to meet the needs of my child;
4. The Preschool determines that it is not in the best interest of the Preschool or other children enrolled in the Preschool to have my child in attendance;
5. The Preschool determines that my child or I have been unable to adjust to the Preschool.
6. False information on the Application Form.

I understand that:

1. The Registration/Supply fee is not refundable.
2. I must give a 2-week notice when withdrawing from the program.
3. I am enrolling my child for a specific age group, with no guarantee regarding staff or classroom requests.

Signature of Parent or Legal Guardian

Date