

**Surfside Methodist Children's Center**  
**800 13<sup>th</sup> Avenue North**  
**Surfside Beach SC 29575**  
**surfsideumc.org**

Date \_\_\_\_\_

# \_\_\_\_\_

**4-year-old class** \_\_\_\_ **3-year-old class** \_\_\_\_ (3 day) \_\_\_\_ (5 day) **2 ½ year old class** \_\_\_\_ (3day) \_\_\_\_ (5day) **Lil Tots** \_\_\_\_ (3day)

NAME OF CHILD \_\_\_\_\_ boy \_\_ girl \_\_ BIRTHDATE \_\_/\_\_/\_\_

NAME CHILD COMMONLY CALLED \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

RESIDENT ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_

MAILING ADDRESS if different \_\_\_\_\_

HOME PHONE NUMBER \_\_\_\_\_ EMERGENCY CONTACT (NAME) \_\_\_\_\_

EMERGENCY PHONE NUMBER \_\_\_\_\_

CHILD'S DOCTOR \_\_\_\_\_ DOCTOR'S PHONE NUMBER \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ PLACE OF EMPLOYMENT \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ PLACE OF EMPLOYMENT \_\_\_\_\_

PARENT'S MARITAL STATUS \_\_\_\_\_ DENOMINATION \_\_\_\_\_

SCHOOL DISTRICT (IF KNOWN) \_\_\_\_\_

NAMES AND AGES OF BROTHERS AND SISTERS:

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BROTHER \_\_\_\_ SISTER \_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BROTHER \_\_\_\_ SISTER \_\_\_\_

GROUP EXPERIENCE: NONE \_\_ SUNDAY SCHOOL \_\_\_\_\_ OTHER \_\_\_\_\_

WHAT THINGS IS HE/SHE AFRAID OF? \_\_\_\_\_

PARTICULAR PROBLEMS WITH WHICH HELP IS NEEDED \_\_\_\_\_

ALLERGIES \_\_\_\_\_

**PLEASE READ AND SIGN BACK OF FORM**

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**2018-2019 Children's Center Fees and Requirements**

**All Registration Fees are NON-Refundable and due at time of registration.**

**All Children in the following Classes Must Be Completely Potty Trained.** See back of form for details of "completely potty trained."

A \$100.00 Registration Fee/Supply Fee is required for these classes. (\$85.00 if you register before April 1, 2018)

\*An \$80.00 activity fee is required at time of registration.

**4-Year-Old Classes:** Monday through Fridays, 8:30 - 12:00 p.m. Must be 4 by September 1, 2018. Monthly fee is \$325.00 (\$300.00 church members, board Members)

**3-Year-Old Classes:** Monday through Friday 8:30 a.m. - 12:00 p.m. Must be 3 by September 1, 2018. Monthly fee is \$300.00 (\$275.00 church members, board members)

**3-Year-Old Classes:** Tuesday, Wednesday, Thursday 8:30 a.m. - 12:00 p.m. Must be 3 by September 1, 2018. Monthly fee is \$225.00 (\$200.00 church members, board members)

**Early 3's Class:** Monday through Friday 8:30 a.m.-12:00 p.m. Must be 3 by March 1, 2018. Monthly fee is \$300.00 (\$275.00 church members, board members)

**Early 3's Class** Tuesday, Wednesday, Thursday 8:30 a.m. -12:00 p.m. Must be 3 by March 1, 2018. Monthly fee is \$225.00 (\$200.00 church members, board members)

**Lil Tots:** Tuesday, Wednesday, Thursday, 8:30 a.m. – 12:00 p.m. Children ages 1-2. Monthly fee is \$225 (\$200.00 church members, board members)

**\*\*TUITION IS DIVIDED INTO 9 MONTHLY PAYMENTS DUE THE 1<sup>st</sup> OF EACH MONTH, SEPTEMBER through MAY and does not change regardless of the number of school days in each month. (A late fee of \$5.00 will be accessed if not paid by the 5<sup>th</sup> .) Please refer to the handbook for further explanation.**

**STACEY CLEVELAND, DIRECTOR - Children's Center Office – 843-238-2734 ext. 106**

**Permission slips and agreements:**

I agree to abide by the rules and regulations stipulated in the SMCC Handbook.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

Appropriate behavior is expected of all children. The school reserves the right to require the removal of any child who will not conform to this standard.

I have read and agree with the above statement.

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

I give permission for my child's picture to appear on the Church / SMCC web site. I understand no names are to be listed on-line.

YES \_\_\_\_\_ NO \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Medical Emergency Procedure:**

Each child **must** have an "Emergency Contact" card on file before the first day of school. This card **must** have at least three different emergency numbers; i.e. the Mother, the Father, and one other name and number. Parents are responsible to notify the school in writing of any changes during the year.

In the event of a non-serious injury, the SMCC personnel will administer first-aid as per American Red Cross/Heart Assoc. training procedures and contact the parents if any further treatment is necessary. If no contacts are reached in a reasonable amount of time, EMS will be called if deemed necessary.

In the event of a serious injury, the SMCC will immediately contact EMS and a name from the "Emergency Contact Card" and follow the American First-Aid procedures until EMS arrives.

I give permission for my child (or legal ward) \_\_\_\_\_ to be treated or attended to by authorized medical personnel in the event of an emergency. I, therefore, hold free from liability Surfside Methodist Children's Center, staff and all attending medical personnel acting according to the accustomed procedure and rendering general and special medical related treatment on the behalf of and for the goodwill of my child (or legal ward).

Mother's signature \_\_\_\_\_ Date: \_\_\_\_\_

Father's signature \_\_\_\_\_ Date: \_\_\_\_\_

Field Trips –All Parents are responsible to transport their own child on any field trip taken. All field trips are voluntary.

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

**To be Completely Potty Trained Means the child can independently pull up/down pants, get on/off potty, wipe, flush and wash own hands. No diapers or pull-ups allowed in the CDC classes.**