



2950 Tanger Blvd. Locust Grove, GA 30248
770 957-9715

Registration Packet

Classes offered for the 2021-2022 school year:

CLASS	DAYS	REGISTRATION FEE	MATERIAL FEE	MONTHLY TUITION	ANNUAL TUITION
MDO (1s)	TUES & THURS	\$100.00	\$55.00	\$140.00	\$1400.00
Toddlers (2s)	MON, WED, FRI	\$100.00	\$75.00	\$180.00	\$1800.00
Threes (3s)	MON-THURS	\$100.00	\$100.00	\$195.00	\$1950.00
Pre-K (4s)	MON-FRI	\$100.00	\$150.00	\$220.00	\$2200.00

*****Your child must be the appropriate age by September 1st*****

- All classes meet from 8:45AM-12:00PM
- First LG Preschool follows the Henry County Public School's calendar for all holidays and inclement weather closings.
- You must complete and turn in the registration form along with your child's registration and materials fees to confirm his/her spot. **Registration fees are nonrefundable**
- Tuition for the month and your child's immunization form must be turned in by the first day of class.



2021-2022 Registration Form

Please mark the class in which you are enrolling your child:

MDO _____ Toddlers _____ Threes _____ Pre-K _____

**Your child must be the appropriate age for his/her class by September 1st

General Information

Child's Full Name: _____

Name Called: _____ Sex: M F Birthday: ____/____/____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____

Parent/Family Information

Legal Guardian/Father's Name: _____

Cell Phone: _____ Work Phone: _____

Email: _____

Place of Employment/Employer: _____

Legal Guardian/Mother's Name: _____

Cell Phone: _____ Work Phone: _____

Email: _____

Place of Employment/Employer: _____

My child lives with: _____ Both Parents _____ Mother _____ Father _____ Other

Siblings Names and Ages:

Child Information

My child is able to say:

___ 0-50 words ___ 51-150 words ___ 151-300 words ___ 301-1200 words ___ > 1200 words

My child speaks using:

___ incomplete sentences ___ simple sentences ___ complex sentences

Is your child toilet trained?

___ Yes ___ No

****This is a requirement for children who are entering into 3K and Pre-K**

Please list allergies your child has:

Please list any medical issues or other concerns that affect your child:

Emergency Contacts

1. Emergency Contact Name: _____

Phone: _____ Relationship to Child: _____

2. Emergency Contact Name: _____

Phone: _____ Relationship to Child: _____

3. Emergency Contact Name: _____

Phone: _____ Relationship to Child: _____

Church Affiliation

Are you currently an active member at a local church? _____ Yes _____ No

If yes, where? _____

Medical Release

We, the parents/guardians of _____ do hereby relieve First Baptist Locust Grove and all workers at First LG Preschool from any liability or fault due to any accident or illness that may occur to said child while he/she is in attendance of the program. Be it further agreed that said child is in attendance, permission to grant to any and all medical personnel the right to treat said child for any accident or illness in the absence of said parents, and that said parents do hereby relieve any and all workers and First LG Preschool program off any liability in connection with the medical treatment to said child.

Legal Guardian/Father’s Signature _____ Date: ____/____/____

Legal Guardian/Mother’s Signature _____ Date: ____/____/____

****Both Parents signatures are required****

Photo/Video Authorization

I, the legal guardian of _____, hereby authorize First LG Preschool to use, reproduce, and/or publish photographs and/or video that may pertain to my child-including their image, likeness, and/or voice without compensation. I understand that this material may be used in various publications, recruitment materials, or other related endeavors. This material may also appear on the First LG Preschool’s internet website. This authorization is continuous and may only be withdrawn by my specific recission of this authorization.

Legal Guardian/Parent’s Signature _____ Date: ____/____/____

Privacy

Your personal information will not be given out to marketers. However, parents often want to have a list of names, addresses, and/or telephone numbers of the children in their child’s class to contact them about class parties, birthday parties, etc. If you DO NOT wish to have this information given out please sign below.

DO NOT give my address or phone number to anyone.

Legal Guardian/Parent’s Signature _____ Date: ____/____/____

Pick Up Authorization

Your child will only be released for pick up by his/her parent(s)/guardian(s) unless you add an alternate name below. You may add anyone to this list during the school year by sending a written note to the director giving him/her permission to pick up your child. PLEASE SIGN THE NOTE.

If someone other than you is going to pick your child up from school, please make sure they bring photo identification with them and ask them to park and walk to the door, so his/her identification can be verified.

If anyone is forbidden by law from having custody of your child, we must have a copy of the restraining order on file.

Child's Name: _____

The following individuals have my permission to pick my child up from First LG Preschool

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Legal Guardian/Parent's Signature _____ Date: ____/____/____

Late Pick Up

I understand that I am to pick up my child on or before the designated ending time. I understand that after 12:10 P.M. may incur a late fee of \$5.00 plus \$1.00 each minute thereafter. Late charges are due at time of pick up. If you know that you will be late, please call and let us know immediately. If, after a reasonable amount of time, we do not hear from you, or an emergency contact, we must contact the authorities.

Tuition

I understand that my tuition payment is due by the 1st of each month. The first tuition payment for the school year is due the first day of school, August 24th. Tuition paid after the 5th of each month is considered late and a \$15.00 late charge will be added to the total tuition due. Tuition 30 days past due may result in my child losing his/her space in the preschool program. I understand that all tuition is due in full regardless of my child's attendance. I understand that tuition does not decrease during the holiday months. Annual tuition is broken down into 10 equal monthly payments. Final tuition payment for the school year is due no later than May 5th. Tuition must be paid in full in order for your child to participate in graduation and/or last day of school activities, which consist of parties and program.

Withdrawal Policy

I understand that if at any time I need to withdrawal my child from First LG's Preschool program, I must provide a two weeks' notice to the preschool director.

I the legal guardian/parent hereby acknowledge that I have read and understand the above policies.

Legal Guardian/Parent's Signature _____ Date: ____/____/____



2950 Tanger Blvd. Locust Grove, GA 30248
770 957-9715

**Preschool Admissions
Developmental/Disciplinary Policy**

Students at First LG Preschool will be grouped according to age on the first day of school for the upcoming school year. Because school is often a child's first experience with participation in a structured group setting, developmental difficulties that are not easily noticeable in the home may become obvious. Our teachers and/or director will contact you at the first indication of any cause for concern. If the parents and teacher agree that further specialized help is needed, we can refer you to the proper source to get necessary help. Many services and evaluative tests are available free of charge through the county board of education.

In the event that a child's needs and/or behavior monopolize the teacher's time to the extent that he/she is unable to give the rest of the class adequate attention, we reserve the right to remove the child from the program. Registration and Materials fees are non-refundable, and any monthly tuition will be prorated in the event of removal. We ask that you inform us promptly of any concerns you have about your child's development.

Please note that First LG Preschool is exempt from Bright from the Start, and is therefore not a state-licensed program.

I have read and understand the Preschool Admissions Developmental/Discipline policy for First LG Preschool

Signature: _____ **Date:** _____

2021-2022 Parental Acknowledgement

First LG Preschool agrees to provide child care for:

(Child's Full Name)

Monday Tuesday Wednesday Thursday Friday
(Circle Days of the Week)

From 8:45 A.M. to 12:00 P.M
Starting August 9,2021 to May 19, 2022

I understand that First LG Preschool follows the Henry County Board of Education schedule for all holidays, breaks, and emergency closings.

I understand that First LG Preschool does not provide meals and I acknowledge that it is my responsibility to send my child with a snack daily.

My child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent(s), or facility personnel.

I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g. telephone numbers, work location, emergency contacts, child's physician, child's health status, and immunization records, etc.

The facility agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water related activities occurring in water that is more than two (2) feet deep.

I authorize the childcare facility to obtain emergency medical care for my child when I am not available. I have received a copy of the Student Handbook and agree to abide by the policies, rules, and procedures of First LG Preschool.

I understand that the center will advise me of my child's progress and issues relating to my child's care as well as any individual practices concerning my child's special needs. I also understand that my participation is encouraged in the facility activities.

I acknowledge that I have been advised that First LG Preschool is not a licensed program and has received exemptions from licensure by *Georgia Department of Early Care and Learning*.

Signed: _____ Date: _____

(Parent/Guardian)

Signed: _____ Date: _____

(Facility/Administrator/Director)