



SUMMER CAMP 2017 REGISTRATION

PLEASANT GROVE UNITED METHODIST PRESCHOOL
4415 PLEASANT GROVE CHURCH ROAD
RALEIGH, NC 27613
919-787-1652

Child's Name _____
(Last) (First) (Middle) (Name used)

Date of Birth _____ Male ___ Female

Circle the class your child will attend in the fall:

3-year-old 4-year-old Transition Kindergarten First Grade

Parents Names _____
(Mother) (Father)

Address _____
(Street) (City, State) (Zip Code)

Phone Numbers: home _____ / work _____ / cell _____

E-MAIL ADDRESS _____

Please place an "X" next to the week(s) that you would like your child to attend.

- _____ June 5-9 Construction Zone (Week A)
- _____ June 12-16 Construction Zone (Week B)
- _____ June 19-23 Let's Get Buggy
- _____ June 26-30 Water, Water, Everywhere

Number of weeks attending _____ x \$140.00 per week

Total Due _____ * Check # _____

PLEASE ATTACH PAYMENT IN THE FORM OF A CHECK OR A MONEY ORDER AND RETURN TO THE PRESCHOOL OFFICE.* If attending more than one session a payment plan can be worked out with the preschool office.

STUDENTS NOT CURRENTLY ENROLLED NEED TO ALSO ATTACH A COMPLETED EMERGENCY/INFORMATION FORM AND PROVIDE AN UP-TO-DATE MEDICAL FORM & IMMUNIZATION RECORD. (Forms can be printed from our website: www.pgumc.org click on preschool and then forms.)

I understand that no credits, allowances, or decreased fees will be given in the event of absence. Pleasant Grove UMC Preschool has the right to cancel a class if enrollment does not meet minimum requirements. If a class is cancelled a full refund of fees will be made.

PARENT'S SIGNATURE _____ DATE _____