

## REGISTRATION FOR THE MUSEUM EXPLORERS PRESCHOOL 2024-2025

Child's First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Nickname or Nicknames: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Child Lives With: \_\_\_\_\_/Relationship: \_\_\_\_\_

Child Lives With: \_\_\_\_\_/Relationship: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Authorized to Pick-Up Child: \_\_\_\_\_ (Y/N)

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Authorized to Pick-Up Child: \_\_\_\_\_ (Y/N)

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone \_\_\_\_\_

Siblings (Name and Ages): \_\_\_\_\_

Child must be able to toilet independently. Terms for toileting used at home: \_\_\_\_\_

Persons who may NOT pick up this child (Names/Relationship): \_\_\_\_\_

Is there a custody order in place? Yes \_\_\_\_\_ No \_\_\_\_\_ (Please include a copy of legal documents.)

Please note: Children will only be released to a designated person 18 years or older. Thank you!

Physician: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of last physical examination: \_\_\_\_\_ Immunizations Current: \_\_\_ Yes \_\_\_ No

Dentist: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

List of Allergies and medications:

---

---

Medical or Behavioral Concerns, including medications:

---

---

Please list any fears that your child may have:

---

---

Is there anything else we should know about your child?

---

---

---

**Tuition and Registration Fees** \_\_\_\_\_ **Class Sessions are from 9:00am-12:00pm** \_\_\_\_\_

Tuition is due by the 1<sup>st</sup> of each month. Monthly payments go from September through May-(9) or June-(10).

**Tuition for the Museum Explorers Preschool 5 Day Program** (Monday-Friday) is **\$4,780.00** annually.

I/we choose to pay in the following manner:

\_\_\_\_\_ Annually \$4,780.00    \_\_\_\_\_ Monthly \$531.11 (9 months)    \_\_\_\_\_ Monthly \$478.00 (10 months)

**Tuition for the Museum Explorers Preschool 3 Day Program** (Monday, Wednesday, Friday) is **\$2,880.00** annually.

I/we choose to pay in the following manner:

\_\_\_\_\_ Annually \$2,880.00    \_\_\_\_\_ Monthly \$320.00 (9 months)    \_\_\_\_\_ Monthly \$288.00 (10 months)

**Tuition for the Museum Explorers Preschool 2 Day Program (Tuesday and Thursday)** is **\$2,035.00** annually.

I/we choose to pay in the following manner:

\_\_\_\_\_ Annually \$2,035.00    \_\_\_\_\_ Monthly \$226.11 (9 months)    \_\_\_\_\_ Monthly \$203.50 (10 months)