

FALL 2024-SPRING 2025

UCC Preschool mailing address 1506 Browning Pl. Suite 101
Preschool located at 2800 Claflin Rd- Manhattan, KS 66502
Kristi Plummer, Program Director ph: 785-537-2196
Email: preschoolacademy@university.church Web sight:www.uccpa.org

CONTACT INFORMATION: Child's full Name: _____ Birthday: ____ Male Female Child's nick name if any_____ Church Affiliation: Address: City: zip: Primary email ___ My Child is completely Potty Trained: Yes No Primary Phone: CLASS PREFERENCE: Indicate your choice by checking the box next to the preferred days. Registration is filled on a firstcome first-serve basis. A \$100.00 Non-refundable registration fee per student or \$150 per family is required at the time of registration. We offer a 10% discount off the registration fee for children of active military (ID required). *UCCPA reserves the right to cancel classes based on insufficient enrollment. Tuition is due on the 5th of each month from August to May. The monthly tuition amount remains the same regardless of your child's start date, attendance, school breaks, or unforeseen school closings. PROGRAM ENROLLMENT FALL 2024 MONTHLY PAYMENT Aug-May \$215 2.5 YEAR OLD (2 DAY) 9-1:00 PM (must be 2.5 years old by August 31, 2024) MON/WED **TUES/THURS** 3-4 YEAR OLD 9-1:00 PM (must be 3 years old and potty trained by August 31, 2024) MON/WED TUES/THURS \$215 TUES/WED/THURS \$265 4-5 YEAR OLDS (3 DAY Pre-K) 9-1:00 PM (must be 4 years old by August 31, 2024) TUES/WED/THURS \$275 4-5 YEAR OLDS (4 day Pre-K) 9-1:00 PM (must be 4 years old by August 31, 2024) MON/TUES/WED/THURS \$330 REGULARLY ENROLLED EXENDED DAY 1-3:00PM: MUST BE 3 YEARS OLD AND POTTY TRAINED MON___ TUES___ WED ___ THURS___ \$20 DAILY I QUALIFY FOR THE 10% MILITARY DISCOUNT YES FOR RETURNING STUDENTS ONLY: BILL MY REGISTRATION FEE THROUGH BRIGHTWHEEL YES

Date Registration Received: _____ Paid by check #____ cash____ BW ____

Office use only:

Military discount: Yes

Parent (Father's) contact Information: for billing purposes~ is this parents' address the same as the child? Y / N	
Father's full Name:	Email address:
Mobile phone:	☐ contact for emergency pick-up
Company:	Job Title:
Parent (Mother's) contact Information: for billing purposes~ is this parents' address the same as the child? Y/N	
Mother's full Name:	Email address:
Mobile phone:	☐ contact for emergency pick-up
Company:	Job Title:
Allergy Information: Does your child have alle (Please specify)	How did you hear about UCCPA? In how many years will this student attend Kindergarten? 1 yr 2 yrs 3 yrs 4 yrs
Emergency contact/additional pick-up information: (two contacts other than parents are required)	
Name:	Relationship: Phone:
Name:	Relationship: Phone:
(Additional contacts can be added to the child's file as needed through Brightwheel)	
I understand that the registration fee is non-refundable and must be paid to hold my child's placement until the fall. I also understand that the first full tuition payment is due by August 5, 2024 to confirm my child's placement. The registration fee will NOT be refunded if the child has been placed in the program and drops for any reason. We will however, give a full registration refund if we cannot place your child by the first day of class. Make all registration checks payable to UCCPA, pay with cash or your brightwheel account if you are a returning family (through BW you will be required to pay the processing fee of .90 cents & a 2.9% fee if using a credit card). Signature	
Signature	Date