

YORBA LINDA UNITED METHODIST CHURCH PRESCHOOL

Early Care Registration School Year:

Our regular preschool program begins at 8:30 each morning. We do have an additional program offering of early care for those families who need to drop off their child earlier between 7-8:30 am. Spaces are limited, and we do not have drop-in early care available. As you plan for this upcoming school year, please consider your family's needs, and turn this form in as soon as possible if you need early care.

| We will have loving, trusted, qualified staff to welcome each child during early drop off until 3:30 am, at which point they will be taken to their regular classroom. | | | | | | | | |
|--|---------------|------------|----------------------------------|--|--|--|--|--|
| Please enroll my child for the following early care schedule: | | | | | | | | |
| Child's Name: | | | | | | | | |
| Early Care 7:00-8:30 am | | | | | | | | |
| | 2 Day Program | \$70/month | M / T / W / Th / F (circle days) | | | | | |
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|---------------|-------------|----------------------------------|
| 3 Day Program | \$90/month | M / T / W / Th / F (circle days) |
| 4 Day Program | \$110/month | M / T / W / Th / F (circle days) |
| 5 Day Program | \$130/month | M / T / W / Th / F (circle days) |

| Please initial below: | | | |
|----------------------------------|-------------------------|-----------------------------------|----------------------|
| I understand that the co | st for early care is ar | n additional cost on top of my re | gular annual tuition |
| I understand that I will b | e billed monthly for | early care along with my tuition | |
| I understand that any chadvance. | nanges I make to an e | early care schedule must be requ | ested 30 days in |
| | | | |
| Parent's Signature | Date | Director's Signature | Date |