



Celebrating 75 Years

First Presbyterian Weekday School

"Learning that starts in the heart."

Winchester, VA – 116 S Loudoun Street – (540) 662-7588

Registration Form 2022-2023 – Student Information

First Name	Middle Initial	Last Name	Name Used	Gender	Date of Birth:
Street Address		City	State		Zip Code

Parent Information

Parent Name	Home Phone	Cell Phone	Address, if different from child
Email Address (required)			Mother's Employer and Phone
Parent Name	Home Phone	Cell Phone	Address, if different from child
Email Address (required)			Father's Employer and Phone

Release Information

Individuals AUTHORIZED to pick up your child (place names in space)

Individuals NOT AUTHORIZED to pick up your child (place names in space) Please attach appropriate paperwork such as a divorce decree if a parent is not allowed to pick up child (32-05-252/6)

Emergency Information

Medical condition, allergies, food intolerances, etc. (Write NONE if 'not applicable'.)

Does your child take any medications regularly? If YES, please list.

Child's Physician	Phone Number	
Name of emergency contact (other than parent)	Home Phone	Cell Phone
Name of Insurance Company	Policy Number	Insured's Name

Has your child been exposed to NUT products? YES NO

Has your child been STUNG by a bee? YES NO

AGREEMENTS & STATEMENTS

The Weekday School agrees to notify the parents/guardian OR emergency contact whenever the child becomes ill, and the parents/guardian OR emergency contact agrees to pick up the child as soon as possible. The parents/guardian OR emergency contact authorize the Weekday School to seek immediate medical care if an emergency occurs and the parents/guardian OR emergency contact cannot be reached. Parent Signature _____ Date _____

Nondiscriminatory Statement: The Weekday School is open to all students ages 6 weeks to 5 years old regardless of race, color, creed, gender, or nationality.

Confidentiality Statement: Information about any child at FPWDS is confidential and will not be given to anyone except VA Department of Education or Social Services designees or other persons authorized by law unless the child's parent/guardian gives written permission. Information about a child in this program will be given to the local department of social services if the child received a day care subsidy or if the child has been named in a report of suspected child abuse or maltreatment or as otherwise allowed by law.

Do you give permission for your child to participate in field trips? YES NO
 Are you a member of First Presbyterian Church? YES NO
 Has your child ever attended preschool? YES NO Name/address of previous school: _____
 Has anyone in the family previously attended FPWDS? YES NO Name/years: _____

CLASS OFFERINGS and TUITION RATES

*Please indicate 1 for first choice and 2 for second choice.

Child's Name: _____ Date of Birth: _____

INFANTS 6wks - 12mo	M/W/F	\$275/month	T/Th	\$185/month
	M-F	\$450/month		
TODDLERS 13mo - 23mo	M/W/F	\$265/month	T/Th	\$180/month
	M-F	\$430/month		
TWOS 24mo - 35 mo	M/W/F	\$255/month	T/Th	\$170/month
	M-F	\$410/month		
THREES 36mo - 47mo	M/W/F	\$240/month	T/Th	\$160/month
	M-F	\$390/month	M-Th	\$320/month
FOURS 48mo - older	M/W/F	\$250/month	M-Th	\$330/month
	M-F	\$400/month		
FIVES 5 by 12/31	M-F	\$400/month		

Non-refundable Registration Fee (circle one): \$55 - single child OR \$80 - family

Tuition Deposit: A non-refundable deposit of \$100 per child will be due on June 10, 2022, which will be applied to September's tuition. The remainder of September's tuition will be due by August 10, 2022. All tuition is due by the 10th of each month. Monthly tuition is billed and collected one month in advance.

Class Supply Fee: \$25/child (to be paid with September's tuition)

OFFICE USE ONLY

Registration fee received by: _____ Date/Time Registration received: _____
 Check Number: _____ Amount: _____ Cash Amount: _____