

# PRE-KINDERGARTEN

A ministry of  
**First Baptist Church**  
100 S. Hedgecoke  
Borger, Texas 79007  
806-273-5621

Welcome to the WEE School Pre-Kindergarten program of First Baptist Church, Borger. In order to register your child, please fill out and submit the accompanying form with a \$35 registration fee and your child's immunization record. This fee is non-refundable and helps to cover the expenses of school supplies that the program furnishes. (If you so desire, you may pay \$20 of this fee now and \$15 at the start of the Spring semester.)

1. Tuition (\$75) is due during the first week of each month. You may give your payment to your child's teacher. Make checks payable to First Baptist Church and put your child's name on the memo line. If paying with cash, you will receive a receipt each month.
2. Students must be 4 years old by September 1.
3. Classes will meet Tuesday, Wednesday, and Thursday from 9 a.m. to 12 noon. You will receive a postcard notifying you of the first day of school and the parent/child orientation.
4. Students may come as early as 7:45 a.m. by enrolling in our Early Bird program for an additional \$8 per month.
5. Each month students may register for Stay & Play, an extended care program offered two Tuesdays a month from 12 noon until 3 p.m., for an additional \$7 each time.
6. WEE School provides the supplies for each class. Students should bring a backpack each day, preferably a medium to large size.
7. We will have the same holidays as the Borger public schools.
8. General Policies:
  - a. Only enrolled children are permitted in the classroom.
  - b. To withdraw a student, please contact the director and the teacher.
  - c. Refunds are not given for part of a month missed.
  - d. Tuition is due as long as a place is reserved for a child.

We are so excited about the opportunity of having your child in our Pre-Kindergarten program and count it a high privilege to be a small part of his/her educational foundation.

(This page is for your records)

# PRE-K REGISTRATION FORM

Child's Full Name		Please circle those that apply:    Early Bird Arrival    Male    Female	
Child's Address		Date of Birth	Child's Home Phone #
Mother or Guardian's Name	Address		Email Address
Father or Guardian's Name	Address		Email Address
List telephone numbers where parents or guardian may be reached while child will be in class.	Mother's Telephone #	Father's Telephone #	Guardian's Phone #
	Home	Home	Home
	Work	Work	Work
	Cell	Cell	Cell
Church Affiliation	Previous Nursery School		
Names of persons to whom my child may be released:			
Other children in the family and their ages:			
List any special problems that your child may have (such as allergies, sunburn sensitivity, diet requirements, etc., and any likes or dislikes such as food preferences) that the staff should be aware of:			
Was this program recommended to you by someone? If yes, please give their name.			
<b>AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:</b>			
In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the facility director to take my child to:			
Name of Licensed Physician	Address		Telephone No.
OR TO (name of hospital or clinic)			
I give consent for any and all necessary treatment when my child is in the care of this physician and/or hospital/clinic.			
_____		_____	
Signature-Parent or Legal Guardian		Date	
Communicable diseases your child has had:			
Serious diseases or accidents your child has had:			
Does your child have any speech, emotional, or behavioral problems?			
I hereby :			
<input type="checkbox"/> give <input type="checkbox"/> do not give	my consent for my child to participate in field trips or other planned trips away from the facility conducted and supervised by facility staff and I give permission for my child to be transported for this purpose.		
<input type="checkbox"/> give <input type="checkbox"/> do not give	my permission for my child's picture to be taken and possibly used by the Pre-K school staff in newspaper displays, bulletin boards, slideshow presentation, church directory, and church website.		
<input type="checkbox"/> give <input type="checkbox"/> do not give	my permission for my name, my child's name, my address, and my phone number to be published in the Pre-K school directory and monthly class calendars when applicable.		
_____		_____	
Signature-Parent or Legal Guardian		Date	

