

2024-25 Registration Form  
Madison Methodist Church Preschool  
100 Post Oak Road - Madison, MS 39110  
601-853-7436 www.madisonmc.org

The completed Registration Form and payment of the nonrefundable \$175.00 registration fee guarantees your child's place for the 2024-2025 school year. If registering for more than one class, you are responsible for the registration fee and tuition for both classes.

Checks should be payable to MMC Preschool. Payments may be mailed to 100 Post Oak Rd. Madison, MS 39110 - Attention: MMC Preschool.

Before the start of the school year if you should need to withdraw from our program, a 30-day written notice (prior to the July 1<sup>st</sup> draft of August tuition) is required. If the required notice is not received, you will be responsible for the August tuition payment. Once the draft has been made, August tuition is nonrefundable. In addition, at any time during the school year, if you fail to give the 30-day written notice, you are responsible for payment of tuition and other fees for the 30 days following the withdrawal.

Please Print:

Child's Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Birthday: \_\_\_\_\_ Age as of September 1: \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Allergies: \_\_\_ Yes \_\_\_ No Epi Pen: \_\_\_ Yes \_\_\_ No Explanation: \_\_\_\_\_

Is there a sibling enrolled? \_\_\_ Yes \_\_\_ No If yes, name of sibling: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Cell: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Cell: \_\_\_\_\_

Mother's Home Address: \_\_\_\_\_

Father's Home Address if Different: \_\_\_\_\_

Preferred Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Name of Person Responsible for Payments: \_\_\_\_\_

I understand that by signing this agreement I agree to all MMC Preschool policies, procedures, rules, and regulations.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Parent/Legal Guardian)

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OFFICE USE ONLY

Start Date: \_\_\_\_\_ Class Assigned: \_\_\_\_\_ Teacher Assigned: \_\_\_\_\_

Registration Fee \$ \_\_\_\_\_ Cash \_\_\_ Check \_\_\_ Check #: \_\_\_\_\_

Supply Fee: \$ \_\_\_\_\_

Tuition: \$ \_\_\_\_\_ TOTAL: \$ \_\_\_\_\_

1/31/23