

**2024-25 Student Enrollment Form
Madison Methodist Church Preschool**

(Office Staff to fill out only)

100 Post Oak Road
MADISON, MS 39110
(601)853-7436
(601)856-6058(EMAIL: PRESCHOOL@MADISONMC.ORG)

START DATE: _____
CLASS: _____
TEACHER: _____

CHILD'S NAME: _____ BIRTHDAY: _____

HOME ADDRESS: _____

PARENTS NAME(S)

MOTHER CELL: _____ FATHER CELL: _____

MOTHER'S WORK #: _____ FATHER'S WORK #: _____

NAME OF BUSINESS: _____
NAME OF BUSINESS: _____

EMAIL ADDRESS TO RECEIVE ALL NOTICES:

(PLEASE PRINT CLEARLY)

2ND EMAIL FOR FILE: _____

MARITAL STATUS OF PARENTS: _____ MARRIED, LIVING TOGETHER, _____ SEPARATED,
_____ DIVORCED,

IF DIVORCED, PLEASE PROVIDE CUSTODY AND VISTATION AGREEMENT FOR CHILD:

SIBLINGS, NAMES & AGES:

SPECIAL NEEDS OR CONCERNS: ALLERGIES (FOOD &/OR MEDICINE) - If your child has an allergy or special need please provide documentation from physician):

EPI PEN: ___ YES ___ NO

MEDICATIONS THAT YOUR CHILD TAKES DAILY: _____

NAME OF CHILD'S PHYSICIAN: _____ PHONE: _____

EMERGENCY INFORMATION: (IN CASE OF AN EMERGENCY PARENTS WILL BE CALLED FIRST)

Unless you have stated a preference, in the case of a life-threatening trauma, your child will be transported by ambulance to University of Mississippi Medical Center – Blair E. Batson Children's Hospital.

Parent Signature: _____

I would prefer my child be taken to _____ for emergency treatment.

EMERGENCY INFORMATION: (IN CASE OF AN EMERGENCY, PARENTS WILL BE CALLED FIRST)

NAME OF ALTERNATIVE PERSON(S) TO CONTACT IN CASE OF EMERGENCY WHEN PARENTS CANNOT BE REACHED (Must provide at least one alternate number)

NAME: _____ PHONE: _____ RELATION: _____

NAME: _____ PHONE: _____ RELATION: _____

NAME: _____ PHONE: _____

RELATION: _____

AUTHORIZATION TO PICK-UP CHILD

I give permission to the following person(s) to pick up my child, _____, from Madison MC Preschool. I will notify the Preschool by note or email if someone will pick up my child other than my spouse or myself.

NAME: _____ PHONE NUMBER: _____ RELATION: _____

1. _____

2. _____

3. _____

4. _____
5. _____
6. _____

PARENT/LEGAL GUARDIAN: _____ **DATE:** _____

(PLEASE CALL OR EMAIL ANY NEW NAME(S) FOR PRESCHOOL FILES)

AUTHORIZATION & PERMISSION

Permission for Field Trips (I agree ____, I do not agree ____) to give permission for my child to accompany his/her class and Madison MC Preschool staff on field trips planned and authorized by the center. These may be neighborhood walks or trips in a Madison MC van. In addition, individual permission slips need to be signed for field trips away from the Preschool (see handbook for more details)

Emergency Treatment (I agree ____, I do not agree ____)

that in the event of an illness or accident which require immediate medical treatment at a time when a parent cannot be located, I give permission for the director of Madison MC Preschool, or other Preschool personnel designated by the director, to authorize such treatment or call 911. I will not hold Madison MC Preschool or medical personnel responsible, with the understanding that every attempt was made to contact the parents and other persons listed for emergency contact.

Permission for Photo/Video Use (I agree ____, I do not agree ____) to give permission for Madison MC Preschool to take pictures and/or video of my child for display or advertising purposes, including local newspapers, bulletin boards, or Madison MC publications.

Phone Number & Address Release (I agree ____, I do not agree ____) to give permission for Madison MC preschool to use our phone number and address for church and preschool use only. It will not be given to anyone outside the Madison MC family.

Playing on the Madison MC Campus & Designated Field Trip Sites (I agree ____, I do not agree ____) to give permission for my child to participate in indoor and outdoor games, basketball, playing on playground equipment, and general playing with other children.

Parent Handbook (I agree ____, I do not agree ____)

I have received and read a copy of the childcare regulations summary provided in the Madison MC Preschool Parent handbook and agree to follow all guidelines and policies set forth there. I understand that if I do not comply with these guidelines and policies my child may be asked to leave the program.

Madison MC Church/Preschool Staff Babysitting (I agree ____, I do not agree ____)

I understand if a Madison UMC staff /preschool person babysits my child outside of Preschool hours, Madison MC will not be held liable for anything that occurs between the baby sitter and you or your child.

Car Seats (I agree ____, I do not agree ____)

I understand that Madison MC preschool staff cannot be responsible for buckling in your car seat. All car seats should be properly buckled before you drop off or pick up your child. If you need someone else to pick your child up, that party will be responsible for buckling the car seat in their car. Another person on the authorized list will be called if this requirement is not met.

Child Pick-up (I agree _____, I do not agree ___)

I understand that if someone else is picking up my child I must email the director or send a written note to verify the name and the date this party will pick up. This person must be an authorized party on the child's information sheet in their file. This person must be at least 18 years of age and able to supply documentation of their identity.

Toilet Training Policy (Three's and Up)

Madison MC Preschool Parent Handbook - page 13

We want potty training to be a positive experience for your child. A documented parent-teacher consultation is required prior to beginning potty training. Children in 3 and 4 year old classes must be toilet trained before entering our program and this includes being able to snap and zip their clothing. The teachers are there to assist the child and guide the child if they are having problems. This is part of the child's learning and becoming more independent. Any special circumstances will need to be reported to the preschool director and will be reviewed by the children's ministries leadership team. If your child has continuous toilet accidents, you may be asked to discontinue preschool until toilet training is complete. In order to hold your child's place in preschool, you will be required to continue tuition payments while we are working with your child.