



A Preschool Program of Hillspring Church

Fall 2026 – Spring 2027

Tuesdays-Thursdays, 9am -2pm

Start date to be determined

Enrollment Fee (Non-refundable): \$55.00 per child (not to exceed \$110 per family; This fee MUST be paid at the time of enrollment. Enrollment forms will not be accepted without payment of the enrollment fee.

Monthly Tuition Rates: Infants (must be at least 6 weeks old), 1's, 2's, 3's

One Day a week: \$106 a month

Two Days a week: \$186 a month

Three Days a week: \$265 a month

Tuition can be paid in full and will receive a 10% discount. August tuition will be prorated; it will be due the week that school begins. Tuition for September through May will be due on the 5th of each month.

Family Discount

Younger siblings will receive a 10% discount on tuition. There is no discount on enrollment fees.

Please complete 1 enrollment application for each child attending. Please print.

Child's Name _____

Gender _____

Age on September 1, 2026

_____ DOB: _____

Class enrollment: Infants One's Two's Three's

(Please circle) Tuesday Wednesday Thursday



A Preschool Program of Hillspring Church

Name and contact information of adult(s) with whom child lives with:

Mom's Name _____

Dad's Name _____

Mom's
Address _____ City _____
_____ Zip _____

Mom's Cell: _____

Mom's employer _____

Dad's
Address _____ City _____
_____ Zip _____

Dad's Cell: _____

Dad's employer _____

Mom's Email
Address _____

Dad's Email
Address _____

Other children in family:

Name & Age: _____

Name & Age: _____

Name & Age: _____

Name & Age: _____



A Preschool Program of Hillspring Church

Any custody arrangements or people NOT allowed to pick up your child that the office/teachers need to be aware of:

Emergency Contacts (in case a parent cannot be reached); Provide name, relationship, and phone number.

- 1. -----
- 2. -----
- 3. -----

People allowed to pick up your child in addition to those listed above:

Does the child attend church regularly? YES NO

Name of Church:



A Preschool Program of Hillspring Church

Does the child nap regularly at home? What do we need to know about nap time (where they sleep, if they need something to sleep with, are they swaddled (for infants only), etc. Please be detailed.

Has the child ever been suspended or expelled from a daycare/preschool/school for any reason? Yes / No If yes, please explain

Has your child demonstrated negative social behaviors (hitting, pushing, biting, etc.)? Yes / No If yes, please explain

Has your child been recommended for any testing for special services, even if the recommendation was not followed? Yes / No If yes, please explain



A Preschool Program of Hillspring Church

Has your child shown signs of or been diagnosed with any emotional or behavioral disorders, Autism, ADD, ADHD, ODD, sensory processing, or another health diagnosis (asthma, food allergies, GERD, cystic fibrosis, etc.) Yes / No If yes, please explain _____

Is there any other information that you feel we should know about your child?

Please submit a copy of your child's current immunization record with this enrollment form.



A Preschool Program of Hillspring Church

It is our goal to welcome each and every child. However, our teaching staff is not trained to accommodate special needs (including emotional and/or behavioral disorders). There will be an 8 week introductory period for each child to ensure that we are a good fit for them. If a student has difficulty adjusting, that child's teacher will communicate this with you and keep you informed of his/her progress. When needed, a conference will be held with the parent and the director as well as the executive pastor (if necessary). If a child is unable to adjust, is violent, continually disruptive, or has needs that our teaching staff cannot meet, that child may be dismissed for the remainder of the enrollment period.

To be used only in the case of an emergency:

Physician's Name:

Address:

Phone Number:

Health Insurance: Company

Name:

Phone Number:

Policy Number:

I give Hillspring Kids permission to transport my child _____ to the nearest medical center to receive care should an emergency arise and immediate treatment is needed.

Parent Signature:



A Preschool Program of HillSpring Church