

Enrollment Checklist/Preference Form

Please indicate a 1st and 2nd choice for your child for the 25-26 school year.

Please return these forms to Preschool. Your Physician's Form is not due until the beginning of school in August.

Child's Name _____ Birthdate _____

Parent's Name _____ Email _____

Check your boxes:

- I have completed the Preference Form below
- I have completed and signed the Enrollment Form (front and back)
- I have attached the Registration Fee
 - \$90 cash or check (made out to First Presbyterian Preschool)
 - \$91 payment by Zelle (fppreschoolpayments@moorevillefpc.org)
- I will turn in the Physician Form by the first day of school



Zelle

*Please note: The age your child will be **on or before 8/31/25** is the class you should enroll in.

Program	Days	Cost Per-Month (Check or Cash)	Cost Per Month (Zelle)	Indicate 1st & 2nd Choice
Two Year Old—2 Days/Week	T, Th	\$200	\$203	
Two Year Old—3 Days/Week	M, W, F	\$215	\$218	
Three Year Old—2 Days/Week	T, Th	\$200	\$203	
Three Year Old—3 Days/Week	M, W, F	\$215	\$218	
Three Year Old—5 Days/Week	M, T, W, Th, F	\$260	\$263	
Four Year Old—3 Days/Week	MWF, MTTh, or TWTh	\$235	\$238	MWF _____ MTTh _____ TWTh _____
Four Year Old—5 Days/Week	M, T, W, Th, F	\$260	\$263	
Transitional Kindergarten <i>Open first to those that turn 5 on or before 8/31/25. For those turning 5 in the fall semester, please contact the director for availability.</i>	M, T, W, Th, F	\$275	\$278	