Suntree United Methodist School
CHILD CARE APPLICATION FOR ENROLLMENT

Student Information: Date of Birth: _____ Sex: ____ Date of Enrollment: _____

Full Name: _____
Last First Middle Nickname

Child's Physical Address: _____

_____

Family Information:

Custody: Mother _____ Father _____ Both _____ Other _____

Child Lives With: _____

Mother's Name: _____ Father's Name: _____

Address: _____ Address: _____

Home Phone: _____ Home Phone: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

Cell # _____ Cell #_____

Work #_____ Work #_____

Email Address_____ Email Address _____

Medical Information:

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: _____ Phone: _____

Doctor: _____ Phone: _____

Hospital Preference: _____

Please list allergies, special medical or dietary needs, or other areas of concern: _____

_____

_____

Contacts:

The child will be released only to the custodial parent, legal guardian, and those listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency if, for some reason, the custodial parent or legal guardian cannot be reached:

_____

Name Address Home # Cell #

_____

Name Address Home # Cell #

_____

Name Address Home # Cell #

Helpful Information about Child:

Language(s) spoken at home _____ Bilingual _____Yes _____No

_____

_____

_____

_____

In an effort to assist your child in meeting his/her individual goals, please let us know if your child is already participating in services such as Speech, O.T., and/or P.T.
(Please provide a copy of your child's Individualized Education Plan (IEP) with your registration.)

Check all that apply: _____Yes, my child currently has an IEP.

_____We are awaiting a finalized IEP.

_____We are interested in learning more about how my child's specific needs will be met.

_____

_____

_____

_____

Sections 7.1 and 7.2 of the Child Care Facility Handbook require a current physical examination (Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment.

Section 7.3 of the Child Care Facility Handbook requires that parents receive a copy of the Child Care Facility Brochure, "Know Your Child Care Facility" (CF/PI 175-24)

Section 2.8 of the Child Care Facility Handbook requires that parents be notified in writing of the facility's disciplinary and expulsion policies.

Your signature below indicates that you have received the above items and that the information on this enrollment form is complete and accurate.

_____ _____

Signature of Parent/Guardian Date

Suntree United Methodist School
Student Information Form

Child's Name _____

What three words would you use to describe your child? _____

What are your child's strengths? _____

Does your child currently have any struggles that they are working through? _____

_____

What are your child's favorite: Toys? _____ Pet(s)? _____

What are your child's fears? _____

What other information would you like to share about your child?

_____

_____

Name, age, and sex of other children in the family _____

Previous schools attended_____

If your child (or a previous sibling) has attended SUMS, please list your child's teacher(s)

_____

How did you find out about this school? _____

What do you want your child to receive from this program? _____

_____

Will you allow your child's picture to be included on our SUMS private FB page? _____

Will you allow your child's picture to be shown in our end-of-the-year video? _____

Will you allow your child's picture to be published in the local newspaper? (no names included) _____

Will you allow your child's address, phone #, parent information, and email to be included on a class list that is given out to each child in his/her class? _____

Religious Affiliation (Optional)_____
Church you attend

_____

Please indicate if you are interested in being contacted by Suntree United Methodist Church for membership information. _____

Dear SUMS Families,

When creating class assignments for the next school year, please know we assign students to classes using a collaborative team approach involving current teachers and administration. This ensures that a lot of background knowledge and thought regarding your child goes into the process. However, if there is information, we may not be aware of that you would like us to consider when making placement decisions, we invite you to complete the form below and return it to the school during final registration with your registration forms. Specific teacher requests should not be included.

Sincerely,

Special information to consider: _____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

Parent/Guardian Signature Date

Suntree United Methodist School
Registration and Agreement Form
Wee Three and Three-Year-Old Program
2026-2027 School Year

Please Print

Child's Name _____ M _____ F _____

Birth Date _____ Phone #_____

Parent/Guardian Name_____

Address _____

_____

Class Assignment	Registration Fee	Tuition Fee
_____ 2 Day - Wee Three *Students must be 3 on or before Dec. 31, 2026*	$300.00	$300.00 per month
_____ 2 Day - 3 Year-Old *Students must be 3 on or before Sept. 1, 2026*	$300.00	$300.00 per month
_____ 3 Day - 3 Year-Old *Students must be 3 on or before Sept. 1, 2026*	$350.00	$350.00 per month

Parent/Guardian must agree to the following for the Wee Three and Three-Year-Old Programs:

- I agree to comply with the Suntree United Methodist School program's rules and regulations regarding fees, attendance, health, parking, clothing, and other items specified in the school's School Handbook issued each year. I am aware of the scheduled school holidays.
- I agree to the Late Pick-up Fee policy.
- I grant permission for my child to use all the play equipment and participate in all the school's activities.
- I received the Suntree United Methodist School Handbook, which is located on the school website.
- I received the Suntree United Methodist School Discipline Policy, which is found in the School Handbook.
- I received the pamphlet-Know Your Child's Day Care Center, which is found in the school handbook.

- I have read the Tuition Policy in the School Handbook.
- I agree to pay the tuition fee charged for the program.
- I agree to the program's registration fee, which is non-refundable unless the family moves away from the Melbourne area before the start of school.
- I agree to notify the school 30 days in advance of withdrawal.
- I agree to the late tuition fee policy in the School Handbook.

Parent/Guardian Signature _____Date _____

School Staff will complete the information below the line.

Registration Fee Date Paid _____Check/Amount_____
Polo Shirts purchased_____Date Paid _____Check/Amount_____