

Child's Name _____

Date of Birth _____

Valley PreSchool

P. O. Box 127

Houghton, New York 14744

(585) 567-2264

APPLICATION FOR ADMISSION

We are very pleased that you want to send your child to Valley PreSchool, a ministry of the Houghton Wesleyan Church, during the 2011-2012 school year. It is a privilege to have the opportunity to become acquainted and involved with your child. Because of this, we want to do all we can to make this a memorable time of learning, growth, and fun. In order to do so, we want to inform you of the activities your child will be involved in while at Valley PreSchool. Please take a few moments to read and fill out the following Application and Liability/Medical Release.

Valley Preschool, sponsored by the Houghton Wesleyan Church, has been in operation for over 43 years. We meet from September through May on Monday, Wednesday, and Friday mornings from 9:00 - 11:45. The program is designed to supplement the home experiences of three, four, and five-year-olds and to help meet their developmental needs.



At VPS, children actively explore, investigate, experiment, create, and communicate, forming an understanding of self, others, and the world. In this social setting, children learn to share, participate in group activities, take turns, follow directions, and make decisions independently. In addition to the social learning experience, our flexible curriculum provides opportunities for concepts to be developed and understood. A variety of topics are explored using books, songs, finger plays, drama, and group discussion. Topics include comparing and contrasting, holiday and seasons, shapes and numbers, forming sets, understanding patterning, recognizing letters and their sounds, science concepts, and many others. Lessons incorporate chances to improve fine motor skills, use analytical thinking, sharpen listening skills, follow directions, develop language skills, and share creative ideas. Field trips and special visitors enhance our school experiences. All of this prepares the children to be lifelong learners.



INFORMATION AND PERMISSION FOR FIELD TRIPS

Each year we typically have some off-campus field trips. Some of these are walking trips (the Firehall, creek bridge to play Pooh Sticks, etc.).

Some events require transportation in church vans and/or personal vehicles (Fillmore Library, a local farm, etc.). Prior to these trips you will receive an information sheet/ permission form which will give you the details including destination, transportation, additional parent helpers, etc. In order for your child to participate in the field trips, we will need to have the signed permission slip in hand.

INFORMATION ON FILE

In order to simplify the process, we ask that you fill out the Liability/Medical Release on the back page. We will keep this information and emergency medical/insurance information on file so you will not have to supply this information for each trip. We do ask that you notify us if any of this information changes so we may keep our records current.

Valley PreSchool Admittance and Financial Information

A registration fee is due with each application. This fee pays for materials, equipment replacement, and supplies ordered over the summer for the coming year. It will be refunded if we are unable to admit your child. Checks should be made payable to Houghton Wesleyan Church.

There are financial benefits to applying early. Fees for registration are as follows:

\$20 if application and fee are received by May 1st

\$25 if application and fee are received by July 1st

\$35 if application and fee are received after July 1st.

Acceptance Policies for Valley PreSchool

1. Children entering VPS must be 3 years old by December first of the school year. Children who will turn 3 after this date will be eligible to enter the program the following fall. There will be no accommodations made in January for children who miss the cut-off date.
2. Children entering VPS must be toilet trained. The school reserves the right to reject a student if it becomes evident that he or she is not toilet trained.
3. Acceptance into the VPS program will be on a first come first served basis within each age group (3 or 4 yr olds) so it is wise to apply early. We will limit the number of students in each age group, so it is possible one age will fill faster than the other.
4. Applications will be reviewed by the director and available to staff and the Valley Preschool committee. Acceptance notices will be sent out throughout the summer. You will get a letter early in September giving you necessary info before school starts (VPS typically starts a week after the local public schools). VPS meets Monday, Wednesday, and Friday 9:00-11:45 am.
5. Valley PreSchool admits students of any race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship programs, and any other school-administered programs.

Financial Policies

You are paying for equipment and supplies as well as salary for teachers and assistants. VPS is in session from September through May. Some months contain more sessions than others. The full tuition cost for the year is \$648. We have limited need-based partial scholarships available. There is a check-box on the application to request more information about this. You may choose any of the following payment plans:

1. \$72 per month September through May. Due on the first school day of each month.
2. One payment of \$648 for the year, payable on the first day of schools
3. Two payments of \$324, due the first day of school and January 1.
4. A plan of your choice which is approved by the VPS director and committee
5. If your child attends part of a month due to illness, vacation or withdrawal you must still pay for the entire month.
6. If you withdraw your child from VPS and have chosen one of the larger, lump sum payment options, your account will be reviewed and adjusted appropriately.

Valley PreSchool admits students of any race, color, and national or ethnic origin.

Child's Name _____ Date of Birth _____

Name you would like used at school if different from above _____

Address _____ Phone _____

I would like information about Valley PreSchool scholarships.

Father's Name _____ Business Phone _____

Father's e-mail address _____

Mother's Name _____ Business Phone _____

Mother's e-mail address _____



Because we talk about families throughout the year, please let us know about any family situations about which we may need to be sensitive with your child.

Persons who can be contacted in case parents cannot be reached:

Name	Phone	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

Father's occupation _____

Father's skills, interests, hobbies _____

Mother's occupation _____

Mother's skills, interests, hobbies _____

Is a language other than English spoken at home? _____

If so, what? _____

Brothers and sisters of child (name, age, sex) _____

Others in your home (include family help, roomers, pets) _____

Who besides parents may pick your child up from school? _____

Preschool children show many different patterns of behavior. It will help us to know your child and to give him or her the help he or she may need if you can give us a fairly complete picture of his or her typical interests and behavior.

Briefly describe your child's personality or temperament (quiet, active, sensitive, etc.)

What situations are upsetting or frightening to your child? _____

What are his/her ways of meeting anxiety, disappointment, or conflict? (Please include behaviors such as thumb sucking, tantrums, withdrawal, etc.) _____

Does (s)he recover: slowly _____ fairly quickly _____ quickly _____?

In what ways can adults help him/her recover? _____

What reaction do you anticipate from your child when you leave during the first few weeks of school? _____

How does your child typically respond to correction or discipline? _____

What are your child's favorite toys or types of play activities? _____

How often and in what setting does your child play with other children? _____

Does your child have imaginary play companions? _____

Has your child had previous school experience? If so, where and for how long? _____

What do child and his/her mother enjoy doing? _____

What do child and his/her father enjoy doing together? _____

What things do you especially enjoy about your child? _____

What would you like your child to gain from PreSchool experience? _____

Comment on any unique experiences your child has had or anything outstanding in his/her behavior or situation that we should know about. _____

MEDICAL INFORMATION

Child's doctor _____ doctor's phone _____

Insurance company _____ Policy number _____

If this physician cannot be reached, what action should be taken in an emergency?

Local physician: yes _____ no _____ other _____

Emergency hospital: yes _____ no _____ other _____

Past illnesses (please check) _____ Frequent ear infections _____ Frequent colds

_____ Chicken Pox _____ Measles _____ Mumps _____ Rheumatic Fever

_____ Asthma _____ Hay Fever _____ Diabetes

Serious illness or accidents: _____

Is there any other medical information or any physical limitation we should know about?

List any allergies: _____

Parent's evaluation of child's health: _____

IMMUNIZATION FORM

INFORMATION BELOW SHOULD BE FILLED OUT AND SIGNED BY FAMILY PHYSICIAN OR ATTACH A PHOTOCOPY OF YOUR CHILD'S OFFICIAL IMMUNIZATION RECORD.

CHILD'S NAME _____ AGE _____

DOCTOR'S NAME _____ DOCTOR'S PHONE NUMBER _____

Indicate which immunizations have been completed and the dates they were given:

measles _____ diphtheria _____ whooping cough _____

mumps _____ polio _____ tine test _____

rubella _____ tetanus _____ Hep. B. series _____

Signature of physician _____ Date: _____

**If there is any medical or religious reason these have not been completed, please describe _____

We, the parents of _____
(name of child)

do release and agree to hold blameless the Houghton Wesleyan Church, Valley Pre-School, and all ministry workers thereof from any and all liability, claims, or demands for personal injury, as well as damage and expenses of any nature that may be incurred by the parent/guardian and child-participant that occur while the child is participating in all Valley PreSchool activities.

We, on the behalf of our child-participant, assume all risk of personal injury, damage, and expense as the result of participation in any recreational activities involved.

Authorization and permission are given to the Houghton Wesleyan Church to furnish any necessary transportation, food, and first aid for our child-participant.

We, as parents/legal guardians of the child-participant, give our permission for him/her to participate fully in all Valley PreSchool activities/trips. We give our permission to take said participant to a doctor or hospital and authorize medical treatment, including, but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. We understand that we will be contacted if at all possible and that our family physician will be contacted if possible, but in the event that he/she cannot be reached, the Valley PreSchool staff may choose a reputable physician.

We have read and understand the acceptance and financial policies that accompany this application and certify that all information given on this application and on the immunization and liability/release forms is accurate to the best of our knowledge. We give permission for pictures of our child, taken at VPS, to be used in their advertising brochure.

Name of child _____

Signature of Father

Date

Signature of Mother

Date

(Both parents must sign, unless parents are separated or divorced, in which case the custodial parent must sign)

