



Noah's Ark Preschool
First Presbyterian Church • Greenwood, SC
Preschool Registration Form
2025-2026

Child's Name: _____ Preferred Name: _____

Address: _____ Zip Code: _____

Birthday: _____ Gender: _____ Race: _____

Home Phone: _____

Mother's Name: _____

Occupation: _____

Place of Employment: _____ Work Phone: _____

Cell Phone: _____ Mother's Email: _____

Father's Name: _____

Occupation: _____

Place of Employment: _____ Work Phone: _____

Cell Phone: _____ Father's Email: _____

In the event of divorce, separation, or other circumstances, custody documentation must be provided to the Noah's Ark office on or before the first day of school.

Parents' Marital Status: _____

Parent's address and phone number if different from child: _____

First Presbyterian Church Member: ____ Yes ____ No

Church Membership: _____

Currently Enrolled or Sibling of Currently Enrolled ____ Yes ____ No

Age Your Child will be as of September 1, 2025 _____ (to determine age class assignments)

Has your Child attended Preschool/School in the past? ____ Yes ____ No

Name of Preschool/School attended if different from Noah's Ark: _____



The monthly tuition rate for the 2025-2026 school year is as follows: \$250/month

Please note that we also offer Early Arrival from 8-8:40AM for a flat rate fee of \$65/month, in addition to tuition. Otherwise, drop off begins at 8:40 and the instructional day begins at 9AM.
All children are dismissed by 12pm.

Financially Responsible Party: _____

**If Financially Responsible Party is someone other than a parent, please provide address and telephone number.*

Address: _____

Phone: _____

For your child's spot to be reserved for 2025-2026, we must have both this form and the \$170.00 Registration Fee. If you have two or more children in our program, the Registration Fee for the first child is \$170.00, and the fee for the remaining child/children is \$140.00 each. The Registration Fee is NON-REFUNDABLE.

*All students must be immunized, and a current Immunization Record will be kept on file in the Noah's Ark Office. Forms must be received by July 1, 2025.

Noah's Ark Preschool, its employees, teachers, and director will try their utmost to prevent mishaps or accidents. I understand that unfortunately, at times things happen which are beyond their control. I agree not to hold Noah's Ark Preschool, its employees, teachers, director, board members, or First Presbyterian Church responsible for any accident, mishap, or injury of any kind that happens to my child while attending Noah's Ark Preschool and agree to hold them harmless from any action brought by or on behalf of my child. **Initial:** _____

Mail to: Noah's Ark Preschool, P.O. Box 426, Greenwood, SC 29648
All checks made out to Noah's Ark Preschool please

Amount Enclosed: \$ _____

Signature: _____ **Date:** _____

Office Use Only:

Date Received _____ Registration Fee Paid \$ _____

Ck# _____ Cash _____ Receipt _____