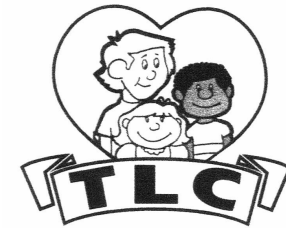


Trinity United
Methodist Church

Trinity Learning Center Ministry



PRESCHOOL REGISTRATION

• Fall, 2019

Trinity United Methodist Church
2796 Charlestown Road
New Albany, IN 47150

Phone: 812-944-2251
Fax: 812-944-2220

Email: office@trinitylearningministry.org
Website: trinitylearningministry.org

Trinity United Methodist Church

Trinity Learning Center Ministry
2796 Charlestown Road
New Albany, IN 47150



Accredited by the NAEYC Academy
for Early Childhood Program Accreditation

REGISTER FOR FALL, 2019

PRE-REGISTRATION
BEGINS MARCH 20, 2019

10:00 AM

(TLC MINISTRY FAMILIES &
TRINITY UMC MEMBERS)

OPEN REGISTRATION
BEGINS APRIL 17, 2019

10:00 AM

You Will Need:

- Enclosed Registration Form
- Immunization Record & Health exam report
- Emergency Contacts
- Registration Fee of:
 - \$50-*Trinity members*, 1st child
 - \$30-*Trinity members*, 2nd child
 - \$85-*Non-members*, 1st child
 - \$50-*Non-members*, 2nd child
- Please plan time to complete enrollment forms at registration or complete ahead.
- If the class of your choice is full, we will place your child's name on a waiting list and notify you when an opening occurs.

FOR MORE INFORMATION,
CALL THE TLC MINISTRY OFFICE
(812) 944-2251

*Accredited by the National Association for the
Education of Young Children (NAEYC)*

TRINITY LEARNING CENTER MINISTRY REGISTRATION—2019-2020

CHILD'S NAME _____ Male Female DATE OF BIRTH _____ AGE ON 8/1/19 _____

CHILD'S ADDRESS _____ CITY _____ ZIP _____

PARENT _____ EMAIL _____ PHONE # _____

PARENT _____ EMAIL _____ PHONE # _____

TRINITY U.M. CHURCH MEMBER YES (____) NO (____)

PLEASE INCLUDE REGISTRATION FEE WITH THIS FORM TO REGISTER. (First month's tuition is due July 15, 2019. The Pre-Kindergarten field trip fee of \$25 is due at registration.)

Indicate class choice (s) below. If classes are full, we will place your name on a waiting list and notify you when an opening occurs.

FALL, 2019-2020 PRESCHOOL:

BEGINNINGS CLASS AM (2 yrs. by 8/01/19) 9:30-11:30 Monday/Wednesday AM Tuesday/Thursday AM Friday AM
Full day PM 9:30-3:00 Monday/Wednesday Tuesday/Thursday Friday

YOUNG 4'S AM (3 yrs. by 8/01/19) 9:30-11:45 Monday/Wednesday AM Tuesday/Thursday AM Friday AM
Full day PM 9:30-3:00 Monday/Wednesday Tuesday/Thursday Friday

PRE-KINDERGARTEN FULL DAY—T/TH (4 yrs. by 8/01/19) 9:30-3:00

PRE-KINDERGARTEN FULL DAY—M/W/F (4 yrs. by 8/01/19) 9:30-3:00

PRE-KINDERGARTEN AM ONLY—M/W/F (4 yrs. by 8/01/19) 9:30-11:45

EARLY (7:30—9:15 AM) Monday Tuesday Wednesday Thursday Friday

LATE (3:15—5:00 PM) Monday Tuesday Wednesday Thursday Friday

Date Registration Received: _____ Amount Paid: _____ Ck. # _____ Cash _____ Wait List _____

Please contact me regarding applying for financial assistance