

# Parkview Weekday Preschool

Parkview Baptist Church • 5805 S. Sheridan Road • Tulsa, Oklahoma • 74145 • (539) 867-3130

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Male \_ Female\_

Registration: \_ 1 day(ones and twos class only) \_ 2 days \_ 3 days

Please check which day(s): Monday Wednesday Friday

T-Shirt Size: \_\_\_\_\_

Available Sizes (2T 3T 4T 5T Small(6-8) Med(8-10) Lrg(10-12) Adult S-XXL)

Child lives with: \_ Mother & Father \_ Mother \_ Father \_ Other \_\_\_\_\_

Siblings (names & ages): \_\_\_\_\_

Pets (name): \_\_\_\_\_

Child's favorite toys/activities: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Family religious preference: \_\_\_\_\_ Church membership: \_\_\_\_\_

## Health Information

Are immunizations up-to-date? Y \_\_\_ N \_\_\_ (attach a copy of most recent immunization record)

If no, please indicate reason: \_\_\_\_\_

Any allergies/special needs/fears: \_\_\_\_\_

Any physical conditions: Eczema \_\_\_ Hay Fever \_\_\_ Asthma \_\_\_ Other \_\_\_\_\_

Any medications taken regularly: \_\_\_\_\_

Check illnesses child has had: Chicken Pox \_\_\_ Mumps \_\_\_ Measles \_\_\_ Rubella \_

Scarlet Fever \_\_\_ Scarlatina \_\_\_ Hepatitis \_\_\_ Mononucleosis \_\_\_ Other \_\_\_\_\_

Has child been tested for any sight or hearing problems or disorders?: Y \_\_\_ N \_\_\_

If yes, list the results?: \_\_\_\_\_

Is your child potty-trained? Y \_\_\_ N \_\_\_

Has child had any surgeries? (include surgery for tubes in ears): \_\_\_\_\_

Present physical condition: \_\_\_\_\_

Any information which would be helpful to the teachers in care of your child:

\_\_\_\_\_

\_\_\_\_\_

List at least one local person who will be available to assume responsibility for your child in an emergency if parents cannot be reached.

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
Address: \_\_\_\_\_ Driver's License: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Release of Child (in addition to above, if any)

I authorize that my child, \_\_\_\_\_ may be released by Parkview Weekday Preschool to the following:

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Name \_\_\_\_\_ Relationship to child \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Video/Photo Release:

I understand that video and/or photographs may be taken of my child and may be used for future publicity. I give permission for Parkview Baptist Church to use media images of my child.

Enrollment Agreement:

Acceptance of this form and annual, non-refundable registration fee (\$50) enrolls your child in our program. Our preschool is a non-profit, weekday ministry of the Parkview Baptist Church congregation. We seek to enrich a child's world by providing outstanding Christian, educational, and social experiences developmentally appropriate to the child's age. We seek to forever touch a child's heart by modeling that faith in God through Jesus is an integral part of each minute of every day.

Date \_\_\_\_\_ Parent Signature \_\_\_\_\_

Emergency Medical Care

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize Parkview Weekday Preschool staff to take my child to an Emergency Room or to the following physician and associates for medical care and give consent for any treatment deemed necessary by the attending physician.

Physician \_\_\_\_\_ Hospital \_\_\_\_\_  
Physician's Phone # \_\_\_\_\_

\_\_\_\_\_(Signature of Parent/Guardian)

# FACEBOOK POST

WE DO POST PICTURES ON OUR PRIVATE FACEBOOK PAGE FROM TIME TO TIME. ONLY PRESCHOOL FAMILIES AND TEACHERS ACCESS THIS PAGE. WE NEED PERMISSION TO DO THIS. PLEASE SIGN THE FORM BELOW GIVING US PERMISSION TO POST THESE PICTURES.

IF YOU WOULD PREFER YOUR CHILD NOT BE PHOTOGRAPHED OR INCLUDED IN THESE POSTS PLEASE CHECK NO.

CHILD'S NAME \_\_\_\_\_ CLASS \_\_\_\_\_

YES \_\_\_\_\_ MY CHILD MAY BE INCLUDED IN THESE POSTS.

NO \_\_\_\_\_ MY CHILD MAY NOT BE INCLUDED IN THESE POSTS.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

THANKS,

PARKVIEW WEEKDAY PRESCHOOL

## **PARKVIEW PRESCHOOL FINANCIAL INFORMATION**

**\$50.00 NON REFUNDABLE REGISTRATION FEE IS REQUIRED AT THE TIME OF ENROLLMENT. (THIS FEE WILL INCLUDE A PARKVIEW PRESCHOOL TSHIRT FOR YOUR STUDENT)**

The monthly tuition amount is the same every month regardless of days missed due to illness, holidays, or inclement weather.

**\*Tuition is due on the first of the month and PAST DUE after the tenth of the month. A late fee of \$20.00 per child will be added to all tuition payments received after the tenth. If tuition cannot be paid and you have not worked out a plan with the director you will be asked to withdraw your child until payments can be made.\***

Payments can be made via cash, check or online. You may mail your checks or place them in the tuition box. Please make all checks payable to Parkview Preschool.

A thirty day notice is required to withdraw a child from the program. Please let us know if you need to withdraw your child.

Parents Signature \_\_\_\_\_

Date \_\_\_\_\_

REGISTRATION FEE \$ \_\_\_\_\_ CHECK NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

# FIRST DAY CHECKLIST

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SACK LUNCH

SMALL SLEEP MAT (*Ladybug, Bumblebee,  
Caterpillar, Firefly, and Cricket Classes*)

BACK PACK

BLANKET- SLEEP FRIEND

EXTRA SET OF CLOTHES

SIPPY CUP OR CUP LABELED WITH STUDENT NAME

DIAPERS LABELED WITH STUDENT NAME

COPY OF CURRENT IMMUNIZATIONS

FACEBOOK RELEASE

**\*\*PLEASE MAKE SURE ALL ITEMS ARE MARKED WITH  
YOUR CHILDS NAME.\*\***

## Weekday Preschool online payment steps:

1. Log on to Parkview Website: [www.parkviewbaptist.org](http://www.parkviewbaptist.org)
2. Click on "Connect at Parkview"
3. Click on "Weekday Preschool"
4. Scroll all the way down to "Pay Tuition Online"
5. Click "Click here to be directed to our online payment site" in the orange box
6. Create your Online Profile (the page will look like picture below)
7. Enter your tuition amount; it will automatically add your \$10.00 convenience fee.
8. Finish and process your payment

\*\*The online tuition payment link will only be available from the 25th of each month until the 10th of the following month (for example, it will open, November 25<sup>th</sup>, and will close/no longer take payments on December 11<sup>th</sup>). After the 10<sup>th</sup> of each month you will need to pay your \$20 late fee per child and pay with cash or check only\*\*

The screenshot displays the online payment interface for Parkview Baptist Church's preschool ministry. The page is titled "Online Payment" and includes a "Return to our Home Page" link. The "Payments" section contains a form with the following details:

Preschool Tuition:	<input type="text" value="0.00"/>
Convenience Fee:	5.00
<b>Total:</b>	<b>\$5.00</b>

Payment Frequency: One Time  
Payment Date:  mm/dd/yy

Buttons:

The "Log In" section includes:

Email Address:   
Password:   
  
[Forgot your Email Address or Password?](#)

The "Create Your Online Profile" section includes:

At the bottom right of the page, there is a link for [Privacy & Security](#).