

Mt. Moriah United Methodist Ark Children  
School Age Registration  
2017-2018 School Year

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Day(s) of the Week:      M      T      W      Th      F  
(Please circle the day(s) your child will be attending regularly)

Before & After school: \_\_\_\_\_ Before School: \_\_\_\_\_ After School: \_\_\_\_\_

Drop in: \_\_\_\_\_ Holidays/Snow days/ school close days: \_\_\_\_\_

Approximate Drop-Off/Pick-Up times: Drop-Off: \_\_\_\_\_ Pick-Up: \_\_\_\_\_  
(Center Hours: 6:30am-6pm) **Please note: Late fee apply after 6pm**

Name of School attending in Fall 2015: \_\_\_\_\_ Grade: \_\_\_\_\_

1<sup>st</sup> day attending: \_\_\_\_\_

## **Nonrefundable annual student fee \$45.00 per family**

**I give permission for my child to be transported to & from St. Thomas Moore & Withamville Elementary using West Clermont Bus transportation.**

**I give permission for Mt. Moriah Ark of Learning to transport \_\_\_\_\_ to  
Child's Name  
& from Locust Corner Elementary, Other West Clermont Schools, and Forest Hills Schools**

**I \_\_\_\_\_ give permission for my child's name & picture to be used in local newspapers, Facebook, Mt. Moriah Ark of Learning newsletter & website.  
Yes \_\_\_\_\_ No \_\_\_\_\_**

**I understand that tuition is due on the first day my child attends each week. A \$5 late fee will be applied to my account if tuition is not paid by the end of the business week.  
I have read, agreed to the terms stated on this contract and I'm award that I am required to pay tuition for all days registered whether my child attends those days or not.**

**Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

Office Use Only

Annual Registration fee paid: \_\_\_\_\_ Tuition Rate: \_\_\_\_\_  
(Date paid)