

LANSDALE AREA FAMILY YMCA

2026-27 PRESCHOOL REGISTRATION FORM

Child's Full Name: _____ Date of Birth: _____ Male/Female

Street Address: _____ Apt. #: _____

Town: _____ Zip Code: _____ Cell Phone Mother: _____

Cell Phone Father: _____ Email: _____

Does your child have any special needs, medical, IEP, or physical conditions of which we should be aware? Is there a custody order in place? **If yes to any of the above, please contact the Childcare Director, prior to registration, to discuss so we may determine if our program is a good fit for your child. Failure to disclose will jeopardize the child's enrollment status.**

Little Learners (age 2 ½ by 9/1/26)

___ T/Th 9 – 12 p.m. \$310/mo.

___ M/W/F 9 – 12 p.m. \$355/mo.

___ M – F 9 – 12 p.m. \$425/mo.

Kiddie Korner Jr. (age 3 by 9/1/26)

___ T/Th 9 a.m. – 1 p.m. \$325/mo.

___ M/W/F 9 a.m. – 1 p.m. \$390/mo.

___ M – F 9 a.m. – 1 p.m. \$540/mo.

Kiddie Korner Pre-K (age 4 by 9/1/26)

(This date coincides with the North Penn School District's cutoff date for kindergarten.)

___ M/W/F 9 a.m. - 1 p.m. \$390/mo.

___ M W F 9 a.m. – 3 p.m. \$440/mo.

___ M – F 9 a.m. – 1 p.m. \$540/mo.

___ M – F 9 a.m. – 3 p.m. \$880/mo.

CHILDREN MUST BE FULLY POTTY TRAINED IN ORDER TO ATTEND THE 3- & 4-YEAR OLDS CLASSES

CHILD HEALTH ASSESSMENT FORM:

must be on-file within 30 days of the child's start date to continue in the program. The form is good for one year from the doctor's signature. It is the parents' responsibility to ensure we have a current form on file. A form will be part of the enrollment packet.

Pertinent Program Information:

The first payment is due July 15. All subsequent payments due the 15th of each month thereafter to avoid late fees.

If the July payment is not made on-time the spot reopens to the public.

No refunds for payments made once program begins.

30-day withdrawal notice required, in writing.

A minimum of a \$50 annual Youth Program Membership is required. A \$25 reinstatement fee is charged for any child who withdraws and re-enrolls in the same school year.

Each child must have an Emergency Contact and Parent Agreement Form, completed in its entirety, and on-file to start.

PAYMENT INFORMATION: All payments are due two months in advance (e.g., September is due July 15). All subsequent payments are payable by the 15th of each month or a \$5 late fee will be added to the account on the 16th. Payments due, which rollover into the next month, will incur a \$10 late fee. We reserve the right, when a payment is 10 or more days late, to remove your child from the program.

GENERAL INFORMATION: Program costs are based on a yearly tuition that is divided into 9 1/2 monthly payments for your convenience. Refunds are not made due to missed classes, holidays, vacations, inclement weather, or withdrawals, except under extraordinary circumstances and at the discretion of the Early Childhood Director.

I, the undersigned, having read the foregoing application, understand and agree to follow the above policies.

Parent Signature

Date