



January 17, 2012

Dear Grace Weekday Parents,

Enclosed is the 2012-2013 school year registration form. Please return it to the School Office no later than Tuesday, January 31st as registration will then open to the public on Wednesday, February 1st.

Also, Summer Fun registration is enclosed. If you are interested in this June program please return *both* enrollment forms.

**Teachers for the 2012-2013 School Year:**

**MMO:** Frances Mason & Mary Gale  
**K2:** Anita Lester, Betty Eckert & Laural McLean  
**K3:**  
5 day: Gina Walseman & Melissa Wacaser  
3 day: Heather Remington & Shawna Clendaniel  
**K4:** Louise Ash, Jessica Lighthart & Kristie Johnson  
**K5:** Gale Mitchum  
**Aide:** Dee Isgette

If you have any questions, please feel free to call me at 766-1621 x2 or email me at [director@graceweekdayschool.com](mailto:director@graceweekdayschool.com).

I look forward to what the Lord has in store for us again next year.  
Thank you and God Bless!

*Joyce Gresh, Director*

Grace United Methodist Weekday School  
Statement of Cooperation  
2012-13

**Tuition:**

We understand our commitment to pay tuition for the amount as referenced on the Enrollment and Tuition sheet provided upon registration. If tuition and fees are not received by the 10<sup>th</sup> of the month, a \$25 late charge will be added to my account. Tuition that becomes 60 days past due will result in the student being withheld from attending school until the full amount due is paid. There are no refunds for registration or tuition payments received.

**School Activities:**

We understand that permission slips will be sent home with the children prior to any field trips for activities off school premises. I understand that signing the permission slip is authorizing my child to attend field trips and activities and therein absolves the school from liability due to injury. In case of emergency or serious illness, we request the school contact us first. If the school or chaperone is unable to contact us, the designated emergency contact will be notified. If the emergency contact cannot be reached, the school has my permission to make whatever arrangements deemed necessary for my child's treatment. If the emergency is life-threatening and we cannot be reached, the physician has permission to act accordingly absolving the school of any liability.

**Discipline:**

We believe that discipline is a necessary aspect of our child's education. We give permission for our child's teacher and/or administrator to make and enforce classroom regulations in a manner consistent with Christian principles. We understand that we have the responsibility as parents to actively support the authority, philosophy, objectives, policies, and discipline of the school. *Note:* GWDS never applies corporal discipline of any form.

In striving to guide each child to attain their highest potential in preparing them for higher learning, we understand that Grace Weekday School is unable to provide ancillary services to meet the needs of students with learning or behavioral issues.

**Parental Commitment:**

It is our commitment to help provide a healthy and positive school environment for our children. We agree that we will in no case complain to other parents, but will register only necessary complaints with the teacher and/or administrators following the principles of the Bible (Matthew 18). We pledge our full cooperation to keep doctrinal controversy out of the school. We agree to abide by the schools established policies and to support the school with our prayers and positive attitude.

We understand that if any time the school determines, in its sole discretion that our actions do not support the ministry, or reflect a lack of cooperation and commitment to the home and school working together, the school has the right to request the withdrawal of our child.

We have completed the registration process and have read and understand the Statement of Cooperation Policy for 2012-13. As well, I have received a copy of the 2012-13 Parent/Student Handbook. We hereby agree to abide by the Grace Weekday School policies, rules and regulations.

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Parent Signature / Date:

*Grace Weekday School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to the school. It does not discriminate on the basis of race, color, national, and ethnic origin in administration of its educational policies and admissions policies.*



**Release Policy:** Our procedure in cases of emergency, such as sudden illness or serious accidents: (1) render first aid; (2) contact parents (home/cell/business) for instructions for care such as if the doctor is to be called, first aid administered, etc. In some cases, failure to establish a contact with either parent could delay treatment. Only after reasonable efforts have been made to contact the parent(s), will we call the doctor on file and only in the most extreme cases will we transport your child to the nearest hospital.

I hereby grant permission for the Director, Assistant Director, and/or teachers of GWDS, or emergency and/or hospital staff to take whatever steps necessary to obtain and provide emergency medical care is warranted.

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

**PICTURES / CLASS LISTS:**

We are proud of our program and take many pictures, especially during special activities and field trips. Permission is granted to print and/or use these pictures in the classrooms, weekday school website, or newsletter:

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

**PICK UP POLICY:**

Only the child's parent(s) or the people listed on this form as having parental consent, will be allowed to pick up your child. Any other arrangements, either temporary or permanent, must be given in writing. In case of a last minute emergency, a parent must call the Grace School office at 766-1621, ext. 2, and the message will be relayed to your child's teacher. A picture ID is required for anyone other than a parent.

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

Name	Relationship	Telephone	Cell
1. _____			
2. _____			

***A current copy of the child's Immunization Record must accompany this registration application.***

**2012-2013 CLASS OFFERINGS:**

Check Program Desired:

**Mother's Morning Out:**  Monday  Tuesday  Wednesday  Thursday  Friday

<b>K2 CLASSES</b>	<b>K3 CLASSES</b>	<b>K4 CLASSES</b>	<b>K5 CLASS</b>
<input type="checkbox"/> 2 Days T/TH	<input type="checkbox"/> 3 Days M/W/F	<input type="checkbox"/> 5 Days	<input type="checkbox"/> 5 Days
<input type="checkbox"/> 3 Days M/W/F	<input type="checkbox"/> 5 Days		

**Registration is complete with the following:**

1. Completed Registration Form
2. Current Immunization Records
3. Non-refundable registration fee

**Registration is \$100 for each child enrolling**

The fee for families with more than 1 child is \$100 for the first child and \$25 for each additional child with a maximum of \$150.

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only:**

Cash amount received: \_\_\_\_\_

Class Assignment: \_\_\_\_\_

Check amount received: \_\_\_\_\_ Check Number: \_\_\_\_\_

\_\_\_\_\_

Grace United Methodist Church Weekday School  
 1601 Sam Rittenberg Blvd.,  
 Charleston, SC 29407  
 (843)766-1621, EXT. 2  
 Email: [director@graceweekdayschool.com](mailto:director@graceweekdayschool.com)  
 Website: [graceweekdayschool.com](http://graceweekdayschool.com)

### ENROLLMENT

There is a \$100 registration fee for each child enrolling. The fee for families with more than one child is \$100 for the first child and \$25 for each additional child with the maximum being \$150.

The registration fee must be paid at the time the child is officially enrolled for the 2012/13 school year. This fee is non-refundable.

**A current SC DHEC Certificate of Immunization must accompany the registration form this year**

### TUITION

September's tuition must be paid by **August 1, 2012**. Tuition is due on the 1<sup>st</sup> of each month. Tuition will run from **August – April**. Late tuition payments after the 10<sup>th</sup> are \$25.

Absences and holidays are not deducted from the monthly tuition charges.

There is a \$25 fee for returned checks.

Checks should be made payable to Grace Weekday School.

### FEES

**Supply Fee: Due August 1<sup>st</sup> with 1<sup>st</sup> month's tuition**

MMO: \$50 per child enrolled

K2 – K5: \$75 per child enrolled

**Book Fee: K5: \$85**

PROGRAM	YEARLY TUITION	MONTHLY TUITION
K2/2 Days	\$1,530	\$170
K2/3 Days	\$1,755	\$195
K3/3 Days	\$1,755	\$195
K3/5 Days	\$1,845	\$205
K4/5 Days	\$2,025	\$225
K5/ Days (8:30-1)	\$2,475	\$275
<b>MMO</b>		
1 Day	\$675	\$75
2 Days	\$1,350	\$150
3 Days	\$2,025	\$225
4 Days	\$2,700	\$300
5 Days	\$3375	\$375

Class Ratios:

K2 – 8:1      K3 – 10:1

K4 – 12:1      MMO: 10:2

K5 – 12:1

**Grace United Methodist Church Members Only**

A 20% tuition discount for participating active members will be given for each child enrolled into GUMC Weekday School.

Grace United Methodist Weekday School  
1601 Sam Rittenberg Blvd.  
Charleston, SC 29407  
(843) 766-1621, EXT 2

Email: [director@graceweekdayschool.com](mailto:director@graceweekdayschool.com)  
Website: [graceweekdayschool.com](http://graceweekdayschool.com)

## 2012 SUMMER FUN ENROLLMENT

Summer Fun is a month-long extension of our GWDS program filled with outside activities & imaginative play. Each week has a different theme such as 'camping', 'zoo', 'carnival', 'space week', etc. The children don't physically go anywhere, but their imaginations will take them to the most exciting places during this month of fun!

**Date:** June 5 – 28

**Time:** 9:00 - 12:00

**Days:** Tuesday, Wednesday, Thursday

<b>Registration Fees:</b>	1 child: \$30	<b>Tuition:</b>	\$160 per month
<i>Fees are non-refundable</i>	2 children: \$50		
	3 children: \$70		

## ENROLLMENT INFORMATION

Child's Name: \_\_\_\_\_ Class enrolled 2011-2012: \_\_\_\_\_  
Parents Name: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_  
Child will be picked up by: \_\_\_\_\_ Telephone Number/Cell: \_\_\_\_\_  
Parent's Signature: \_\_\_\_\_

### For Office Use Only:

Cash received amount: \_\_\_\_\_ Class Assignment: \_\_\_\_\_  
Check received amount: \_\_\_\_\_ Check Number: \_\_\_\_\_