

Marion United Methodist Preschool Application

2022-2023

Class applying for

3's (3 by 8/01/22)_____ 4's (4 by 8/01/22) _____

Applications are considered in the following order:

MUMC members

Siblings of previous students

Children registered in MUMC PDO

Date received _____

Child's Information

Name _____

Date of birth _____

Address _____

Child lives with:

_____ both parents _____ Mother _____ Father

_____ Mother & Stepfather _____ Father & Stepmother

_____ Grandparents _____ other

Tell us about any programs (daycare, preschool, etc.) your child is currently enrolled in. Please let us know who their program leader is and how long they have been in the program.

Has your child been enrolled in another preschool or daycare?

If so please list the program and why they are no longer in the preschool or daycare.

Child's Physician _____

Address _____

Phone Number _____

Parents' Information

Mother (include maiden name)

Name _____

Address (if different from child)

Cell phone number _____

Place of employment _____

Work number _____

Father

Name _____

Address (if different from child)

Cell phone number _____

Place of employment _____

Work number _____

Family Information

Are you members of Marion United Methodist Church? _____

Do you have other children who have attended MUMC
Preschool? _____

Is your child currently enrolled in MUMC Parent's Day Out?

Are you an alumni of MUMC preschool? _____

What church does your family attend?

Does your child attend Sunday school there? _____

References

Please list two family references, people who are a part of your child's life other than relatives.

Name _____

Address _____

Phone _____

Relationship _____

Name _____

Address _____

Phone _____

Relationship _____

Along with these references please
include one reference letter from
someone not listed.

Are you interested in enrolling your child in any of our extended programs?

Funday Monday _____

Breakfast Buddies (please list days) _____

Lunch Bunch (please list days) _____

Lunch Bunch Extended (please list days) _____

Yoga _____

Parent's signature _____

Date _____

Registration fee \$75.00 _____

Applications can be mailed or returned to our church office or preschool. Upon mailing application please notify us via text 870-771-0064, that your child's application has been sent.

Mail application to:

Marion United Methodist Preschool

Attention Preschool Board

PO Box 389

Marion, AR 72364