



YORBA LINDA UNITED METHODIST PRESCHOOL

19002 Yorba Linda Blvd., Yorba Linda, CA 92886 714-777-2384 www.ylumcps.org

2025-2026 REGISTRATION APPLICATION – INFANT 8 WKS TO 24 MTHS

Child's Name: First: _____ Last: _____ DOB: ____/____/____

Name child likes to be called: _____ Male ☐ Female ☐

Address: _____ City: _____ Zip: _____

Home Phone: (____) _____

Child Resides with: Both Parents ☐ Father ☐ Mother ☐ Shared Custody ☐ Other ☐

If there are any custody issues we need to know about, please attach court documentation regarding custody.

Language spoken at home: _____ Church Affiliation: _____

FATHER

Name: _____

Address (if different from child):

City, Zip: _____

Cell Phone: (____) _____

Email Address: _____

Employer: _____

Occupation: _____

Work Phone: (____) _____

MOTHER

Name: _____

Address (if different from child):

City, Zip: _____

Cell Phone: (____) _____

Email Address: _____

Employer: _____

Occupation: _____

Work Phone: (____) _____

- Does your child need an Epi-Pen and/or inhaler? YES ____ NO ____ If yes, the Epi-pen or inhaler must be clearly labeled in the original package with the prescription label attached. YLUMCPS will provide an additional authorization form for you to sign upon receiving the Epi-Pen or Inhaler.

- Are there any special, language, hearing, visual, or behavioral concerns we should know about? Yes ☐ No ☐

If yes, please explain: _____

OFFICE USE ONLY

Date Enrolled: _____ Amount Received: _____ Staff initials: _____ Rm# _____



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2025-2026 PROGRAM SELECTOR

Child's Name: _____

DOB: ____/____/____

Program Dates: August 26, 2025 – June 12, 2026

Please check the desired program below:

8 weeks – 24 Months

2-Day Program (Any 2 days M T W Th F)		
Program Only	8:30 – 12:00	☐ \$504/month
Program + Lunch Hour	8:30 – 1:00	☐ \$561/month
Program, Lunch + Stay & Play	8:30 – 3:30	☐ \$768/month
Full Day	8:30 – 5:00	☐ \$841/month
3-day Program (Any 3 days M T W Th F)		
Program Only	8:30 – 12:00	☐ \$689/month
Program + Lunch Hour	8:30 – 1:00	☐ \$755/month
Program + Lunch + Stay & Play	8:30 – 3:30	☐ \$1016/month
Full Day	8:30 – 5:00	☐ \$1097/month
4-day Program (Any 4 days M T W Th F)		
Program Only	8:30 – 12:00	☐ \$858/month
Program + Lunch Hour	8:30 – 1:00	☐ \$929/month
Program + Lunch + Stay & Play	8:30 – 3:30	☐ \$1234/month
Full Day	8:30 – 5:00	☐ \$1316/month
5-Day Program (Monday-Friday)		
Program Only	8:30 – 12:00	☐ \$1035/month
Program + Lunch Hour	8:30 – 1:00	☐ \$1113/month
Program + Lunch + Stay & Play	8:30 – 3:30	☐ \$1467/month
Full Day	8:30 – 5:00	☐ \$1553/month

ADD ON OPTIONS

Space permitting, a child can attend on a non-enrolled day.

The charges are:

8 weeks-24months

Program Only (8:30am-12pm)	\$70.00/day
Program & Lunch Hour (8:30am-1pm)	\$80.00/day
Program, Lunch, Stay & Play (8:30am-3:30pm)	\$95.00/day
Full Day (8:30am-5pm)	\$120.00/day

Space permitting, a child can extend their hours on an enrolled day.

The charges are:

Add Lunch Hour (12-1pm)	\$25.00/day	Add 1-3:30pm	\$52.00/day
Add Lunch Hours & Stay & Play (12-3:30pm)	\$70.00/day	Add 1-5pm	\$76.00/day
Add Afternoon Care (12-5pm)	\$90.00/day	Add 3:30-5pm	\$30.00/day



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FINANCIAL COMMITMENT

Based on the program selected, my child's annual tuition is \$ _____

Invoices for tuition and fees will be issued via BrightWheel

Please select a payment plan:

- ☐ 1 Payment (Annual) – Full payment before start date. Qualifies for a 3% discount
- ☐ 2 Payments (Bi-Annual) – 1st half payment before start date. 2nd half payment 6 months after start date. Qualifies for a 2% discount.
- ☐ Monthly Payments – Payments due on the 1st of every month before start date. Example: Start date March, monthly tuition due February 1st.

Choose one discount that best suits you:

- ☐ Sibling Discount off one child's tuition per family (10% off the lowest tuition rate)
- ☐ Church Member Discount (10%)

Other Fees:

- ☐ Registration Fee (non-refundable/non-transferrable): \$150.00 1st Child, \$50 per child thereafter
- ☐ Program Change Fee: One change can be made to a child's schedule at no charge, thereafter; there will be a \$25 fee per change.

As evidenced by my signature as the Parent/Guardian, I acknowledge that I have read, understand, and agree to the following conditions for enrollment of the above-named student:

- I understand that the registration fee is non-refundable/non-transferable and due at the time of enrollment to ensure student placement.
- I understand tuition is to be paid via the BrightWheel app, Zelle, Cash, or Check and is due on the 1st of the month and any payment received after the 10th will result in a \$25 per day late fee with a maximum of \$100 per month. If an account becomes thirty (30) days overdue, the Preschool may consider dismissing the student(s).
- I understand all invoices paid via the BrightWheel app will have a processing fee of 2.95% for credit cards and an ACH fee of 0.6%, \$0.25 minimum, \$2 max fee that I will be charged.
- I understand there will be a \$25 charge on all returned checks. After the first instance of an NSF check, your account will automatically convert to "cash, Zelle, money order or credit card only" status.
- 30 days written notice is required from a parent/guardian when requesting a change to a child's schedule. One change can be made to a child's schedule at no charge, thereafter; there will be a \$25 fee per change.
- 30 days written notice is required from a parent/guardian when withdrawing from the program. Upon providing notice, the annual tuition will be recalculated based on the number of days the child attended and must be paid in full. Any notice given after March 31, 2026 is responsible for the full year's tuition.
- Tuition balances must be paid in full by May 1, 2026 and any additional charges incurred after that must be paid by the last day of school 2026.
- I understand I will be charged according to the late pick-up fee guidelines, stated in the preschool handbook, if I pick-up my child after their scheduled end of day. All late pick-up fees must be paid within two (2) weeks of being assessed.
- There is no credit given, reduction in tuition or make-up days offered for holidays, school closures, illness or vacation.
- I have received and agree to read and abide by the preschool handbook.

Parent/Guardian Signature _____ Date _____

Director's Signature _____ Date _____