



*He said, "Let the little children come to me ... for the kingdom of God belongs to such as these." Mark 10:14*

# The Friendship School

*A ministry of Eatonton First United Methodist Church*

## Registration Information

for 2018-2019  
school year

We will be offering two options for 2, 3, and 4 year old children. In order for either class to make, we must have a minimum of 10 children in the 3 and 4 year old class and a minimum of 8 children in the 2 year old class. If these classes don't make, then we will have to adjust our offerings.

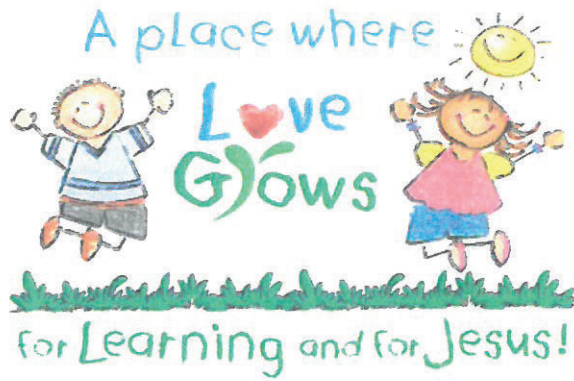
### 3 and 4 year olds

Option	Description	Cost per Month
IA	9:00 - 1:00 Monday - Friday	\$300
IB	9:00 - 2:00 Monday - Friday, includes one hour of Enrichment Club each day	\$375
IC	8:00 - 1:00 Monday - Friday, includes one hour of Breakfast Club each day	\$375
ID	8:00 - 2:00 Monday - Friday, includes one hour of Breakfast Club and one hour of Enrichment Club each day	\$450

### 2 year olds

Option	Description	Cost per Month
2A	9:00 - 1:00 Tuesday, Wednesday, and Thursday	\$180
2B	9:00 - 2:00 Tuesday, Wednesday, and Thursday, includes one hour of Enrichment Club each day	\$225
2C	8:00 - 1:00 Tuesday, Wednesday, and Thursday, includes one hour of Breakfast Club each day	\$225
2D	8:00 - 2:00 Tuesday, Wednesday, and Thursday, includes one hour of Breakfast Club and one hour of Enrichment Club each day	\$270

To register, or for more information, please call the church office at 706.485.5871



**The Friendship School**  
**Eatonton First United Methodist Church**  
**Registration Form**

If mailing, please mail form and \$60.00 enrollment fee to The Friendship School P.O. Box 3129, Eatonton, GA 31024

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_

Mother's Address (if different) \_\_\_\_\_

Mother's Cell \_\_\_\_\_ Work \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's Address (if different) \_\_\_\_\_

Father's Cell \_\_\_\_\_ Work \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Relationship to child \_\_\_\_\_

Phone numbers for **Emergency Contact** \_\_\_\_\_

**\*\*Please indicate which program your child will be participating in \_\_\_\_\_\*\***