



## 1-Year-Old Class 2026-2027 Enrollment Forms

Dear Parents,

Enclosed you will find your Parent Compendium. We encourage you to take time to read the entire compendium as a way to familiarize yourself with the Preschool rules, regulations and more. You will also find the Registration Forms for your child. Please fully complete each form before returning them to the Preschool. Please note: the Emergency Form must be notarized before returning it. Incomplete packets will not be accepted.

The current fees for the 2026-2027 school year will be as follows: Annual One Year Old Preschool Tuition is \$4,500.00 for full-time Monday-Friday 9:00 am to 12:00 pm. This can be paid in full or broken down into ten monthly payments (paid August - May) of \$450.00. Registration fee (non-refundable) is \$50.00 and must be paid on return of paperwork. Annual Material fee is \$150.00 and it is also DUE at the time of enrollment (return of paperwork).

Please return your Enrollment Packet along with your \$50.00 Registration Fee AND \$150 material fee. Open enrollment will begin on February 1, 2026.

Before returning the packet/forms please be sure that you have done the following:

- \* All Forms Completed
- \* Emergency Form has been Notarized
- \* Registration Fee of \$50.00 AND Material Fee of \$150 Included

Thank you,  
Heather Fortson, Director

General Release for St. Edwards Preschool and VPK

For and in consideration of St. Edward's Preschool and VPK, its employees, and St. Edward's Episcopal Church, of Mount Dora, Florida, in accepting our child \_\_\_\_\_, as a pupil at the school located at St. Edward's Episcopal Church, Mount Dora, Florida, we, \_\_\_\_\_ and \_\_\_\_\_, being the father and mother, or legal guardian, or person having legal custody and responsibility for said minor, do hereby agree to release, acquit, discharge, and hold harmless said Church, together with any and all assistants, temporary employees and any and all parents of pupils who may assist in the operation of said Preschool, from any and all liability or claims or liability damages by reason of any injuries, sickness, or any other damages which said child may or might suffer while in the care, supervision, or participating in any activities of said Preschool and while on or near the premises of the said St. Edward's Episcopal Church or Preschool, located in Mount Dora, Florida, and do further authorize said Church, or individuals acting on behalf of same to provide emergency care, including medical care or hospitalization in the event that the undersigned are unavailable to authorize said emergency care, provided that said Church and/or individuals acting on behalf of the same shall make all reasonable efforts necessary to contact the undersigned as soon as reasonably possible.

Dated at \_\_\_\_\_, Florida, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
(county)

Father's Signature: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Address: \_\_\_\_\_

ST. EDWARD'S PRESCHOOL CONFIRMATION  
2026 -2027 SCHOOL YEAR

Name \_\_\_\_\_

Your child is scheduled to attend:  
Monday - Friday 9:00AM - 12:00 PM

Your monthly tuition is \$450.00 for 1 year old classes. Tuition is due by the first of each month. Failure to pay by the tenth of each month will result in a late charge of \$25.00.

In order to complete your child's enrollment the following must be turned in by August 1<sup>st</sup>.

- \_\_\_\_\_ Application
- \_\_\_\_\_ Discipline Policy Form
- \_\_\_\_\_ St. Edward's General Release
- \_\_\_\_\_ Emergency Consent Form "This form must be notarized with at least one parent's signature"
- \_\_\_\_\_ Medical Release
- \_\_\_\_\_ Compendium Agreement Form
- \_\_\_\_\_ Current Physical Form (obtained by your child's pediatrician)
- \_\_\_\_\_ Current Immunization Form (obtained by your child's pediatrician)
- \_\_\_\_\_ Release and Authorization of Photographs and Materials Form
- \_\_\_\_\_ Material Fee \$150.00 Due NOW
- \_\_\_\_\_ Registration Fee \$50.00 Due NOW
- \_\_\_\_\_ First Month's Tuition (Due no later than August 1, 2026)

Thank you,  
Heather Fortson, Preschool Director

St. Edward's Preschool & VPK  
552 E. 5<sup>th</sup> Avenue  
Mount Dora, FL 32757  
352-383-0290 Preschool Office  
Heather Fortson Preschool Director  
[StEdwardsPreschoolVPK@gmail.com](mailto:StEdwardsPreschoolVPK@gmail.com)

## COMPENDIUM: EFFECTIVE FALL 2026

### PURPOSE:

To provide joy and learning for preschool children in a Christian Environment.

### OBJECTIVES:

To provide a place for and to nurture the development of:

- \*The love of Jesus in interaction with one another
- \*Motor and manipulative skills
- \*Language and math skills
- \*Sensory and perceptual acuteness
- \*Creativity and imagination
- \*Self-reliance and a sense of responsibility for one's actions
- \*Individual expression in situations
- \*Compassion for others

### BENEFITS:

- \*Excellence: Academic, social and emotional readiness for school
- \*Generous spatial privilege: Non-restrictive movement in large instructional motivational and play areas
- \*Exceptional teacher/child ratio and diversified gifts from dedicated teachers
- \*The experience of carefully planned excursions for fun and learning
- \*A loving affirming learning environment

### DISCIPLINE:

The friends who come to school at St. Edward's are received in love. We encourage them to love one another. Each friend must respect each others work and space and person. Everyone is required to be polite, kind and obedient at all times. Manifestations of anger, insolence and violence are not tolerated in this setting. Although, we respect each parent's role, influence and views on discipline with his/her child, the teachers have set the following discipline measures in order of importance:

- \* Talking it over with and/or between friends, often eliciting an apology
- \* Verbal reprimand
- \* Asking parents to monitor and assist us with recurring problems
- \* After three conferences with parent and problems are not resolved, friend may be asked to leave St. Edward's Preschool.

### Parents Please Note:

We strive to have a loving, family atmosphere among the parents, teachers and students here at the Preschool. As a result, we strive to have everyone adhere to all of the school policies.

### CALENDAR:

The school is open to parents of enrolled children from 7:00AM – 5:00PM. We follow the same calendar as the public school system of Lake County. However, there may be a few exceptions, please refer to your child's calendar for these exceptions. We will have our opening day in August 2026, TBD by Lake County Schedule.

#### ENROLLMENT:

The enrollment policy is as follows: St. Edward's Church Children first, returning friends second, siblings of former students third and then open enrollment. Parents who wish their child to attend school are urged to register him/her as early as possible as enrollment is limited. **St. Edward's Preschool does not discriminate on the basis of race, color, national or ethnic origin.**

#### WITHDRAWAL:

If you should decide to withdraw your child from the Preschool prior to the end of the school year, you will need to provide a written notice 30 days in advance, or assume responsibility for one month's tuition beyond un-notified withdrawal. We will refund any monies due to you regarding pre-paid tuition, as well as returning your child's health records.

#### SNACKS:

The friends are provided a healthy snack twice each day. You are asked to provide a spill proof water bottle filled with WATER ONLY.

#### DROP OFF:

Children are to be dropped off at the front door between 8:30 AM to 9:00 AM for our Preschool program. Extended hours are available at an additional cost. **Drop off after 9:05AM will not be permitted without a doctor/dentist/appointment note.**

#### PICK UP:

Pick up will be at the front door at 12:00 PM. Please do not park. Please stay in your car. Pull up to the door and we will have your child waiting for you.

#### TRANSPORTATION:

St. Edward's does not provide transportation to and from school. Transportation to and from school must be clearly defined. We will not allow your child to leave school with anyone that is unknown to us without explicit instructions from you.

#### SICKNESS:

When your child has a cold, fever, diarrhea, vomiting, or other symptoms of contagion, he/she must remain at home and must be free of contagion/fever a full 48 hours before returning to school. Notify us at once if your child is exposed to any contagious diseases. If a child becomes ill at school he/she will be placed in an isolated area away from other children. The parent of the sick child will be called and expected to pick the child up within the hour.

#### MEDICINE POLICY:

In the event that your child needs medication, you will need to provide a note from your physician and then St. Edward's Preschool and VPK will provide Official Medicine Form. The parent will be asked to sign off on the Preschool's Official Medicine Form, which states name of child, name of medicine, amount and time given and parent signature. Another option is that a parent or guardian may come to school to dispense the medication as needed.

#### CLOTHING AND ACCESSORIES:

Children are expected to wear comfortable clothes and shoes. We ask that all children wear only closed toed shoes, NO Crocs, sandals or flip flops. Please dress in weather appropriate clothes and send jackets when necessary, always plan for going to the playground. Please send in an extra change of clothes in a gallon size zip lock bag with child's name on it. Children are not allowed to bring candy, gum or any sharp objects. Please do not allow your child to bring toys to school.

**PINOCCHIO PENNIES:**

Friends are invited to bring pennies for our "Pinocchio" bank. The money is donated to the Mount Dora Public Library for the purchase of children's books.

**BIRTHDAYS:**

Please do not ask us to distribute party invitations to private parties unless every friend is to receive an invite. You may send in a special store bought treat for everyone in the class.

**FIELD TRIPS:**

St. Edward's Preschool and VPK have different field trips through out the year. A parent is required to attend if any field trip requires transportation.

**ST. EDWARD'S CHURCH:**

St. Edward's is a friendly and loving church and would welcome you to the Traditional Service at 8:00AM or the Contemporary Service at 10:00AM.

**A PRAYER:**

Among materials given to the Preschool by Mrs. Edward Cross, who operated a nursery school in Mount Dora from 1952-1971, was found this prayer, which we share with you.

"And let me not forget, Lord, that in every babe born into this world , there is the image of your Son; and there is a message you sent by the Babe. May I welcome and serve you in welcoming and serving the children of this world. Amen."

**AGREEMENTS:**

1. I will adhere to the Preschool attendance policy. (Attached)
2. I agree that, if I should decide to withdraw my child from the Preschool prior to the end of the school year, I will provide written notice 30 days in advance, or assume responsibility for one month's tuition beyond un-notified withdrawal.
3. The director of the Preschool has the right to request the withdrawal of a child at any time if it is deemed in the best interest of the Preschool.
4. A current medical exam and immunization record will be submitted before admittance into the Preschool program, per state law.
5. I agree to follow rules, policies and procedures explained in the compendium and in the letters sent home to parents.

In signing this agreement, the parent or guardian has read and agreed to all regulations and policies stated above and in our Parent Compendium.

Please return this form with your child's enrollment forms.

Parent or Guardian \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**St. Edward's Preschool & VPK admits students of any race, color, and national or ethnic origin.**

ST. EDWARD'S PRESCHOOL MEDICAL RELEASE

Name of Student \_\_\_\_\_

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

Home Address \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address(if different) \_\_\_\_\_

Phone \_\_\_\_\_  
Home Cell Work

Name of 2<sup>nd</sup> Parent \_\_\_\_\_

Address (if different) \_\_\_\_\_

Phone \_\_\_\_\_  
Home Cell Work

Alternate Contact \_\_\_\_\_

Relationship \_\_\_\_\_

Address (if different) \_\_\_\_\_

Phone \_\_\_\_\_

Medical Insurance Information

I attest that my son/daughter has medical insurance through

\_\_\_\_\_  
Name of Insurance Company Policy Number Group Number

Medical Condition of Student Excellent Good Fair

**ST. EDWARD'S PRESCHOOL EMERGENCY CONSENT FORM**

I/We, the parent(s) guardian(s) of \_\_\_\_\_ (child's name),  
give my/our consent to any representative of St. Edward's Preschool to obtain needed  
emergency care for my/our child. I/We understand that the insurance information  
provided to St. Edward's Preschool will be used to pay for any treatment and that any  
additional expenses such as deductibles or co-payments will be my/our responsibility.

Notary:

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

My commission expires on \_\_\_\_\_.

Parent/Guardian:

Please print name(s)

Signature

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*THIS FORM MUST BE NOTARIZED BEFORE RETURNING**

RELEASE AND AUTHORIZATION FOR USE BY ST. EDWARD'S PRESCHOOL OF  
PHOTOGRAPHS AND WRITTEN AUTOBIOGRAPHICAL MATERIAL

I hereby grant St. Edward's Preschool & VPK, located, at 552 E. 5<sup>th</sup> Avenue, Mount Dora, Florida 32757, the revocable right and permission to use and publish on the St. Edward's Episcopal Church's and Preschool's website and all social media (private and public) without compensation to me, the written autobiographical material and the photograph(s) of my minor child(ren) named below, in whole or in part, modified or altered, either by themselves or in conjunction with other written material or photographs, as well as using my child(ren) name's name in connection therewith, if the Preschool so desires.

I hereby forever release and discharge the Preschool from any and all claims, actions, and demands arising out of or in connection with the use of said written autobiographical material and photographs, including, without limitation, and all claims for invasion of privacy and libel. This release shall inure to the benefit of the assigns, licensees, employees, and representatives of the Preschool.

I certify that I am over the age of eighteen years, I am the parents or legal guardian of the child(ren) named below, I am authorized to grant this release and authorization on behalf of the child(ren) named below, and I have read the foregoing and fully and completely understand the contents.

Child(ren)'s Names: Parent/Legal Guardian information:

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

Assent

\_\_\_\_\_  
St. Edward's Preschool  
Staff Signature and Title

**St. Edward's Preschool & VPK  
Preschool Attendance Policy**

St. Edward's Preschool and VPK is for 3 hours a day, 5 days a week for 180 days. All enrolled families received a calendar showing the scheduled days off during the operational period of August 2026 through May 2027, TBD by Lake County School Schedule.

You will be required to sign and comply with the following policy on Attendance and Tardiness to remain in the Preschool program.

**Tardiness:** Arrival for the Preschool program is between 8:30 and 9:00 a.m. Preschool arrivals should be signed in at the Preschool Classroom. The earliest time arrivals will be accepted in the classroom is 8:30 a.m. The instructional day starts at 9:00 a.m. and all children are expected to be in place and ready to start the day. Arrivals after 9:00 a.m. are disruptive to the group in progress and difficult for the arriving child as well. We understand that it is occasionally unavoidable to be “running late”, but more than twice a month will not be acceptable and will be cause for termination from the Preschool program.

**Late Pick Up:** The Preschool program ends at 12:00 daily. A late fee of \$10 will be assessed if your child is not picked up by 12:10. An additional fee of \$15 will be assessed for every additional 15 minutes the child is still in attendance.

**Absence:** Daily attendance in the Preschool program is necessary for optimal learning, however, you will be allowed (3) absences per month. Any absences beyond those require a written note from the parent for one of the following reasons:

- Illness or injury of the child or the child’s family member which requires hospitalization or bed rest;
- Physician or dentist appointment; Infectious disease or parasitic infestation; Funeral service, memorial service, or bereavement upon the death of the child’s family member;
- Compliance with a court order (e.g. visitation, subpoena);
- Special education or related services for the child’s disability;
- Observance of a religious holiday or service;
- Family vacation, not to exceed 5 excused absences per program year.

**Please note:** Absences of 5 consecutive instructional days will be considered a withdrawal from the Preschool program at St. Edward's Preschool and VPK. Withdrawals from the Preschool program will not be eligible for re-enrollment. St. Edward's Preschool and VPK will allow one **documented** 5-day absence during the 180 days instructional period. Documentation must be submitted in advance, explain the reason for the 5-day absence, and be dated and signed by the child’s legal custodial adult.

To participate in the Preschool Program at St. Edward's Preschool and VPK, I agree to comply with the terms of this Absence and Tardiness Policy. My signature below is acknowledgment of my review and acceptance of the terms of this policy.

\_\_\_\_\_  
Child’s Name

\_\_\_\_\_  
Printed name of legal custodial adult

\_\_\_\_\_  
Signature of legal custodial adult

\_\_\_\_\_  
Date



State of Florida
Department of Children and Families
CHILD CARE APPLICATION FOR ENROLLMENT

Student Information: Date of Birth: Sex: Date of Enrollment:

Full Name: Last First Middle Nickname

Child's Physical Address:

Primary Hours of Care: From To

Days of the Week in Care: M T W Th F Sa Su

Family Information: Child Lives With:

Mother's Name: Father's Name:

Address: Address:

Home Phone: Home Phone:

Employer: Employer:

Address: Address:

Work Phone: /Cell: Work Phone: /Cell:

Custody: Mother Father Both Other

Medical Information:

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: Address: Phone:

Doctor: Address: Phone:

Dentist: Address: Phone:

Hospital Preference:

Please list allergies, special medical or dietary needs, or other areas of concern:

Emergency Care Plan instructions (if applicable):

Emergency Contacts:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason, the custodial parent or legal guardian cannot be reached:

Name Address Work# Home#

Name Address Work# Home#

Name Address Work# Home#

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Name	Address	Work#	Home#
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**Helpful Information About Child:**

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- Sections 7.1 and 7.2, of the Child Care Facility Handbook, require a current physical examination (Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment.
- Section 7.3, of the Child Care Facility Handbook, requires that parents receive a copy of the Child Care Facility Brochure, "Know Your Child Care Facility" (CF/PI 175-24), **or**
- Section 8.3, of the Family Day Care Home/ Large Family Child Care Home Handbook, requires that parent(s) receive a copy of the family day care home brochure, "Selecting A Family Day Care Home Provider" (CF/PI 175-28).
- Section 2.8, of the Child Care Facility Handbook, requires that parents are notified in writing of the disciplinary and expulsion policies used by the child care facility, **or**
- Section 2.3, of the Family Day Care Home/ Large Family Child Care Home Handbook, requires that parents are notified in writing of the disciplinary and expulsion policies used by the family day care provider.

Your signature below indicates that you have received the above items and that the information on this enrollment form is complete and accurate. I hereby grant permission for the staff of this facility to have access to my child's records.

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Signature of Parent/Guardian

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Date