WEIRTON CHRISTIAN CENTER
Preschool
117 Ivy Street Weirton, WV 26062
304-748-2353 Fax - 304-748-3770
Find us on: facebook.
www.WeirtonChristianCenter.com

2026–2027 Income-Based Registration Form

Child's Information

Child's Full Name: ____

Date of Birth: ____________________________ **MUST BE REQUIRED AGE BY JULY 1st**

Parent/Guardian Name(s): ____

Home Address: ____

City/State/Zip: ____

Phone Numbers: ____

Email Address: ____

Program Selection

☐ Four-Year-Old Class 9:00 AM – 1:00 PM, Monday–Friday Lunch Served
Tuition Cost $190 Monthly September - May (50% Scholarship - $95 monthly)

☐ Three-Year-Old Class (Monday -Thursday) ☐ 8:30-11:30 AM (breakfast) or ☐ 12-3PM (lunch)
Tuition Cost $120 Monthly September - May (50% Scholarship – $60 monthly)

Household Information

Total number of people living in household (including child): _______

Total Gross Annual Household Income

(Include all income from parents/guardians living in the household). $________________________

We take your privacy seriously. Your financial information will be kept safe and confidential and will only be included as part of a combined group total or percentage for grant funding.

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Income-Based Tuition Scale (2026)

Tuition determined by 2026 Federal Poverty Guidelines and total household income.

Tuition Determination:

- Household income at or below **150%** of poverty guidelines → **Full Scholarship (No Tuition)**
- Household income between **151%–175%** → **Half Tuition**
- Household income between **176%–200%** → **Full Tuition**

FAMILY SIZE	Full Scholarship 150% Poverty level		50% Scholarship 175% Poverty Level		Full Tuition 200% Poverty Level
2	32,460		37,012		47, 750
3	40,980		46,637		54,640
4	49,500		56,262		66,000
5	58,020		65,887		77,360
6	66,540		75,512		88,720
7	75,060		85,137		100.08
8	83,580		94,672		111,440

Required Documentation

Please attach one of the following:

- ☐ Most recent Federal Tax Return (first two pages only)
- ☐ W-2 Form(s)
- ☐ Two most recent pay stubs

- ☐ SNAP/SSI/TANF documentation. Amount $______________
- ☐ Other income verification: ________________________________

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Office Use Only

3-YEAR OLD PRESCHOOL TUITION: $120 Monthly for 9 Months ($60 with 50% Scholarship)12.50/day

4-YEAR OLD PRESCHOOL TUITION: $190 Monthly for 9 Months ($95 with 50% Scholarship) 9.50/day

STUDENT'S NAME:____Class_____________________

Tuition Level Approved:
☐ Full Scholarship (No Tuition)
☐ Half Tuition
☐ Full Tuition

Monthly Tuition Amount (if applicable): $_______________

Approved By: __________________________ Date: __________

Special Circumstances

If there are financial hardships or special circumstances you would like considered (medical expenses, job loss, change in income, etc.), please explain below:

____
____
____
____

Parent/Guardian Certification

I certify that the information provided is true and accurate to the best of my knowledge. I understand that income verification is required and incomplete information may delay enrollment. I also agree to monthly payments being made by the 1st of each month, September to May and I understand there will be a $25 late fee assessed after the 10th of each month.

Parent/Guardian Signature: _________________________________ Date: ___________________