



Preschool of the Warm Heart 2026-2027

Our mission statement: Providing a nurturing program in a Christian environment, our mission is to love each child and help each child grow in body, mind, and love of God.

Thank you for your interest in Preschool of the Warm Heart. All children are welcome. We respect and honor differences in religious beliefs, gender, social class, race, and national origin. We offer a loving, nurturing, safe, and stimulating environment where children will be engaged and grow.

Days	Times	Monthly Tuition	Supply Fee
2 days	8:45 am - 12:40 pm	\$273	\$225
3 days	8:45am-12:40pm	\$378	\$250
4 days	8:45am-12:40pm	\$483	\$275
5 days	8:45am-12:40pm	\$588	\$300

Financial aid is available through the Susan L. Allred Scholarship Fund.
Please email Katie Donoway to request an application.

Fee Due Dates

Supply Fee - Due March 20, 2026

May 2027 Tuition Deposit - Due May 1, 2026

Supply Fees and the May 2026 Tuition Deposit are non-refundable unless we are unable to offer the class due to lack of enrollment.

Preschool of the Warm Heart counts on the active participation of families.

**Families are encouraged to share their special gifts and talents with the class.

**Families may serve on the Preschool Advisory Team or as a room parent.

**Families may be asked to serve in the classroom as a substitute and will be asked to participate in fundraisers.

PLEASE MAIL OR RETURN THIS COMPLETED APPLICATION TO:

PRESCHOOL OF THE WARM HEART
ATTN: KATIE DONOWAY, DIRECTOR
2016 MT CARMEL CHURCH ROAD
CHAPEL HILL, NC 27517

PLEASE ENCLOSE A \$45.00 APPLICATION FEE

(All application fees go towards the scholarship fund.)

Make checks payable to Mt. Carmel Baptist Church or MCBC

Preschool of the Warm Heart
APPLICATION FORM 2026-2027
(Please print)

Child's Full Name: _____

Child's Date of Birth: _____ Male: _____ Female: _____

Parents/Guardians Name(s): _____

Home Address: _____

Cell Phone: _____ Other Phone: _____

Email Address: _____

How did you hear about us? _____

Has your child had any previous preschool or childcare experiences? If so, where and when?

Tell us a little about your child. What are they like at home? What does your child enjoy doing? What are your hopes for your child's preschool experience?

****Please circle your preferred number of days each week.****

1-year-old M, W (2 days) or T, TH (2 days)

2-year-old T, TH (2 days) or M, W, F (3 days)

2/3 Combo Class M, T, W, TH (4 days)

**Students eligible for this class must have a birthday between 3/1/2023 - 12/31/23

3-year-old M, T, W, TH (4 days) or M, T, W, TH, F (5 days)

4-year-old M, T, W, TH, F (5 days)

Your application will be reviewed, and you will be notified of your child's class placement. PWH will continue to enroll students until all spots are filled.

Priority will be given to returning students, members of MCBC, and siblings of current PWH students until January 15, 2026. After that, places will be assigned on a first-come, first-serve basis.

Following acceptance, additional paperwork will be needed to complete the enrollment process.

CONTACT INFORMATION

Katie Donoway, Director

mccppwh@gmail.com

919-636-6471

www.preschoolofthewarmheart.com