

## Wait List Application

Today's Date:	<del></del>			
Child's Name	Sex	Current Age	Birth date or Due Date	
Home Address/City, State, Zip			Home Telephone	
Parent/Guardian #1 Name		Email Address	Cell Phone Number	
Parent/Guardian #2 Name		Email Address	Cell Phone Number	
Desired Start Date:				
Please indicate choice of enroll	ment option:			
Full Day				
School Day (8:30-3	:30)			
Part Time (M,W,F) (F	Full Day Only)			
Part Time (T,TH) (Fu	ıll Day Only)			
Is there additional information	that you would	like to share?		

To secure your family's spot on the wait list please submit this application along with a non-refundable application fee of \$25 to the school either in person or via mail to the address below.

There is no application fee for the pre-k class wait list.



