



Wait List Application

Application Date: _____

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 enrollment option:

- Full Day
- School Day (8:30–3:30)
- Part Time (M,W,F) (Full Day Only)
- Part Time (T,TH) (Full Day Only)

Provide 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 \$5 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.