



**ST. LUKE-SIMPSON CHILDCARE CENTER**

**TWOS-FOURS WAITING LIST**

CHILD'S NAME \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ M or F

CHILD'S STREET ADDRESS \_\_\_\_\_  
INCLUDING CITY, ZIP

FATHER'S NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

**SUMMER SESSION:**

AGE GROUP: \_\_\_\_\_ TODDLERS \_\_\_\_\_ 2 YR. OLD CLASS \_\_\_\_\_ 3 YR. OLD CLASS \_\_\_\_\_ PRE-K CLASS

\_\_\_\_\_ PRESCHOOL ONLY (TTH-2'S and 3'S ONLY)

\_\_\_\_\_ PRESCHOOL WITH DAYCARE (TTH-2'S and 3'S ONLY)

\_\_\_\_\_ PRESCHOOL ONLY (MWF 2'S AND 3'S ONLY)

\_\_\_\_\_ PRESCHOOL W/DAYCARE (MWF 2'S AND 3'S ONLY)

\_\_\_\_\_ PRESCHOOL ONLY M-F \_\_\_\_\_ FULL DAYCARE (M-F)

**FALL/SPRING SESSION:**

AGE GROUP: \_\_\_\_\_ 2 YR. OLD CLASS \_\_\_\_\_ 3 YR. OLD CLASS \_\_\_\_\_ PRE-K CLASS

\_\_\_\_\_ PRESCHOOL ONLY (TTH-2'S and 3' ONLY)

\_\_\_\_\_ PRESCHOOL WITH DAYCARE (TTH-2'S and 3'S ONLY)

\_\_\_\_\_ PRESCHOOL ONLY (MWF 2'S AND 3'S ONLY)

\_\_\_\_\_ PRESCHOOL W/DAYCARE (MWF 2'S AND 3'S ONLY)

\_\_\_\_\_ PRESCHOOL ONLY M-F \_\_\_\_\_ FULL DAYCARE (M-F)

**WAITING LIST FEE \$25.00 CHECK # \_\_\_\_\_ PAID BY CASH OR CREDIT (circle one) LAST 4 DIGITS ON CARD \_\_\_\_\_**

IF YOUR CHILD IS PLACED, THIS FEE WILL BE APPLIED TO THE REGISTRATION FEE.

**PLEASE SIGN TO VERIFY THAT THE ABOVE INFORMATION IS CORRECT AND THAT YOU UNDERSTAND THIS APPLICATION IS FOR THE WAITING LIST ONLY AND WAITING LIST FEE IS NON-REFUNDABLE.**

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_