

Thank you for choosing Spring Creek Learn & Play Childcare. Please fill out the waitlist form and return it to us as soon as possible. The day you return the form will be your seniority date. When an opening arises, we will contact you to set up a meeting to meet your child(ren) and start the registration process. We look forward to you joining the Spring Creek Learn & Play Childcare family.

CHILDS INFORMATION:

NAME: _____

MALE FEMALE DATE OF BIRTH: DAY: _____ MONTH: _____ YEAR: _____

FAMILY/GUARDIAN INFORMATION:

NAME: _____ RELATIONSHIP: _____

CONTACT NUMBER: _____ CELLULAR NUMBER: _____

FULL ADDRESS: _____

EMAIL ADDRESS: _____

NAME: _____ RELATIONSHIP: _____

CONTACT NUMBER: _____ CELLULAR NUMBER: _____

FULL ADDRESS: _____

EMAIL ADDRESS: _____

ANY PREVIOUS CHILDCARE EXPERIENCE: _____

PREFERRED STARTING DATE: _____

FULL TIME ENROLLMENT: _____ PART TIME ENROLLMENT: _____

WHAT DAYS DO YOU NEED CHILDCARE - Minimum 2 days & the same days each week

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

Office Use Only

Date Received: