

**Little Friends**

**Pre-Enrollment/Wait-List Application**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Family Information** | | | | | | |
| Parent: | | Parent: | | | **Contact Phone Numbers** (in preferred order):  1. | |
| Home Address | | | | | 2. | |
| E-Mail Address(es): | |  | | | 3. | |
|  | | | | | | |
| **Child Information** | | | | | | |
| Name: | | Birthdate/Due Date: | | | Desired Start Date: | |
| **Child Information** | | | | | | |
| Name: | | Birthdate/Due Date: | | | Desired Start Date: | |
|  | | | | |  | |
| **Enrollment Details** | | | | | | |
| Application Date: | | Program Schedule (Full Time/Part Time): | | | Would you like to be notified of alternative program days/times that may become available? | |
| Monday  \_\_\_\_\_ to \_\_\_\_\_ | Tuesday  \_\_\_\_\_ to \_\_\_\_\_ | | Wednesday  \_\_\_\_\_ to \_\_\_\_\_ | Thursday  \_\_\_\_\_ to \_\_\_\_\_ | | Friday  \_\_\_\_\_ to \_\_\_\_\_ |

**To be placed on our wait-list:**

Submit completed Enrollment Application along with $150 Registration Fee Payment. Checks paid to Little Friends.

Credit Card Payments:

|  |  |  |  |
| --- | --- | --- | --- |
| Name on Card: | Card #: | Exp: | Sec Code: |

I/we are submitting this enrollment application to Little Friends with the understanding that placement will be offered according to the written Little Friends Pre-Enrollment and Wait-List Policies which I/we have read and understand. I/we understand that we can withdraw our application at any time before placement is offered and the Registration Fee will be refunded when the application is deactivated.

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Parent Signature Date Parent Signature Date

**Thank you – we look forward to welcoming your family to the Little Friends Family!**