

## KIDS CHOICE AFTER SCHOOL CARE, INC WAITLIST FORM

**Kids Choice waitlist form MUST BE ANNUALLY RESUBMITTED every 1<sup>st</sup> to 15<sup>th</sup> of January to maintain your space on the waitlist; otherwise you will lose your space (no exceptions!)**

Today's Date:

Desired Enrollment Date (month/date/year):

### Child's Information:

Child's/Children's Full Name(s) \_\_\_\_\_

Grade(s) \_\_\_\_\_

### Parent Information:

Parent/Guardian (Mother)

Parent/Guardian (Father)

Name \_\_\_\_\_

Name \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Email  
Address \_\_\_\_\_

Email  
Address \_\_\_\_\_

**Child's Schedule: Kids Choice waitlist form MUST BE ANNUALLY RESUBMITTED every 1<sup>st</sup> to 15<sup>th</sup> of January to maintain your space on the waitlist; otherwise you will lose your space (no exceptions!)**

Schedule

Circle Appropriate Days

☐ 5 days/week

M T W TH F

☐ 4 days/week

M T W TH F

☐ 3 days/week

M T W TH F

☐ 2 days/week

M T W TH F

Notes (For Office Use Only):