

Little Friends Wait List Registration

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:	
raine.		Dil Madie, Sue Suie.				
Child Information						
Name:		Birthdate/Due Date:		Desired Start Date:		
Anulia atian N		Enrollment Details			Would you like to be notified of alternative	
Application Date:		Program Schedule (Full Time/Part Time):		program days/times that may become		
		•		available?		
			147 1 1			5 : 1
<u>Monday</u>	<u>Tuesday</u>		<u>Wednesday</u>	-	<u> Thursday</u>	<u>Friday</u>
to to		to		to	to	
I/we are subm	itting this enrol	lment a	nnlication to Little Frie	nde with	the understand	ing that
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 prior to accepting placement. Once placement is offered and accepted, we						
understand that the registration fee of \$150 plus tuition deposit of ½ month tuition must be paid						
to secure placement within 5 days of acceptance. Once placement is offered and secured, I/we understand that we are responsible to pay tuition for the placement accepted from the first day						
the placement	_	191016 10	pay tultion for the plac		iccepica mom th	e msi uay

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

Date

Parent Signature