



Eastside Children's Academy

Wait List Application

Date: _____	Preferred Start Date: _____
Child's Name: _____	Birthday: _____
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Preferred Schedule: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time

Parent # 1 Information
_____ Parent Name
_____ Email Address
_____ Phone Number
_____ Address
_____ City, State & Zip Code
_____ Employer Name

Parent # 2 Information
_____ Parent Name
_____ Email Address
_____ Phone Number
_____ Address
_____ City, State & Zip Code
_____ Employer Name

Please initial:

_____ Wait list application fee is \$**150.00**.

_____ Fee is due at the time of application.

_____ This is a **non-refundable** fee.

_____ I understand that the wait list fee is not a guarantee that a space will be available at my preferred start date.

I would like my child to be added to Eastside Children's Academy's Wait List:

Signature

Date