

## Waitlist Application

| Current Employer                             | Phone   |               |
|--|---|---------------|
| Mother/Guardian's Name                       | Phone   |               |
| Current Employer                             | Phone   |               |
| Home Address                                 |   |               |
| Email Address                                |   |               |
| Child's Name(Last) (First) (Middle)          | Due Date/Date of Birth  |               |
| How did you hear about us?                   |   |               |
|  |   |               |
| Enrollment in our youngest classroom is bas  | ed on development. Placement in the older cl<br>cal age. Placement on the waitlist is no grante | ass           |
| I understand that placement on the waitli    | ist is no guarantee of a space being availab  | le when it is |
| needed. Priority is given to families who ar | re already enrolled at our center and who a   | re expecting  |
| another child, and to members of the Luthe   | eran Church of the Redeemer.  |               |
| Parent/Guardian's signature                  | Date  |               |

Please mail or fax your waitlist application to the address below.

714 Riverdale Drive, Charleston, SC 29407. Phone (843) 763-3368. Fax (843) 763-3340