



UNICORN
DAY CARE

**COTTINGHAM SCHOOL AGE PROGRAM
WAITLIST APPLICATION**

Dear Parents of School Age Children,

The Daycare will be registering children as space becomes available. Please complete this form and return it to the day care as soon as possible to get your child on the waiting list. The waiting list is prioritized according to the completion and receipt of this form. This will also let us know exactly what your needs are for your child.

CHILD'S NAME _____

BIRTHDATE / / SEX: M F Going to Grade: 1 2 3 4 5 6
 D M Y

PARENT #1 NAME _____ WK. PH# _____

HM.PH# _____

ADDRESS _____

PARENT #2 NAME _____ WK. PH# _____

HM.PH# _____

ADDRESS _____

START DATE REQUESTED: _____

Please check off the program you require for your child and return this form to the office.

MORNING CARE - 7:30AM TO 8:40AM

HOT LUNCH PROGRAM - 11:45AM TO 12:00PM

AFTER CARE - 3:10PM TO 6:00PM

FOR OFFICE USE ONLY:

DATE RECEIVED: _____

DEPOSIT: _____ POST DATED CHEQUE: _____ REG PACKAGE: _____

DATE SPOT OFFERED: _____ START DATE: _____ (WEB)