

## **Wait List Application Form**

Today's Date	
Child's Name	
Child's Birth Date	
Desired Date of Enrollment	
	Parent Information
Father's Name	
Employer	
Work Phone	
Cell Phone	
E-Mail Address	
Home Address	
Mother's Name	
Employer	
Work Phone	
Cell Phone	
E-Mail Address	
Home Address	
Thank you for placing your child on our wait list. The wait list fee is \$100; please submit your payment as soon as possible to ensure a spot. We will try our best to meet your needs, but cannot guarantee that we will be able to meet your desired date of enrollment.	
For administrative use only:	
Wait List fee paid	
7600A Leesburg Pike, Suite 110, Falls Church, VA 22043	