



# EARLY LEARNING CENTER

Spring of Life United Methodist Church

## **Waiting List Form 2024-2025**

\*Please PRINT CLEARLY\*

Today's Date: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ **Boy** or **Girl** (please circle one)  
Date of Birth: \_\_\_\_\_ Age on Sept 1<sup>st</sup>, 2024: \_\_\_\_\_  
Parent's Name(s): \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email address (the one you check DAILY): \_\_\_\_\_  
Special Needs: \_\_\_\_\_

Class Desired; check or number for preference:

2s:

\_\_\_ MWF 9-2  
\_\_\_ T/TH 9-2

3s:

\_\_\_ MWF 9-2  
\_\_\_ T/TH 9-2  
\_\_\_ M-F 9-2

All students entering any 3s class  
MUST be potty trained.

VPK:

\_\_\_ TWTH 9-2  
\_\_\_ M-F 9-2

You have been placed on the waiting list. This list in NO way guarantees you a placement within the ELC at any time. As spots become available you will be notified by the order and date your form was received. Other dynamics such as girl vs. boy ratios and special needs do take precedence on the Wait List.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Office Use ONLY**

Date called for opening: \_\_\_\_\_

Message \_\_\_ Spoke with \_\_\_ No answer \_\_\_\_\_

Date given to respond: \_\_\_\_\_

Accepted opening? Y N

Date/time of registration appointment: \_\_\_\_\_

Comments:  
\_\_\_\_\_  
\_\_\_\_\_