

Wait List Form

Please note: ESLC care for children 3-12

To be put on our waiting please fill out this form and email it to: <u>eslc@eslcnh.org</u> If you'd like multiple children added to our waiting list, please fill this form out for <u>each individual</u> child. **Please notify us if circumstances change and no longer wish to be on our waiting list.**

Child's First Name	Middle	Last	Date of birth	Gender (M/F)
Street	City	State	Zip	Phone#
If your child is preschoo	l aged, are they toile	t learned (yes/no)?		
		nse is for toilet learne	re enrolled in our prog ed children. We make d	
If your child is school ag	ed (K-5 th Grade), wh	at school are they cur	rently attending?	
What school district is y	our child in?		Grade:	
When do you want you	child to start?			
Does your child have an <i>If yes, please notify the</i>	center and supply a	ny related document		P's, FSPP's, etc.

Documentation will be reviewed by the director to ensure that this is an appropriate environment in which all your child's needs can be met.

School Year Program:

	Morning Pre-school	Full day Pre- school	Mill Brook Before/After Kindergarten	Mill Brook/BG Before School	MB/BG/AD/BM After School
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					



If you are interested in <u>only</u> Emergency Care (School closings and School Vacations- not including Summer) please make note here: ______

Summer Program:

	Mornings Only	Full Day
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Parent or guardian(s) legally responsible for child:

Name			Name		
Street			Street		
City	State	Zip	City	State	Zip
Daytime phone#	Ce	#	Daytime phone#	Ce	#
Email address:			Email address:		

Parent or guardian's signature_____ Date _____