

Date & Time Application is Received _____

Artisticrats Waiting List Application

Child's Name: _____

Birthdate: _____ Or Estimated Due Date: _____

Applicant:

Parent's Name: _____

Second Parent's Name: _____

Projected Date of Enrollment _____

Address: _____ City: _____ Zip: _____

Home Telephone' _____ Work Telephone' _____

Cell Telephone _____ Email Address _____

Signature of Parent or Guardian: _____

***Families are responsible for notifying Artisticrats Childcare Center of any changes in address, telephone number or email!**

Families will be notified as soon as space becomes available. All applicants will be notified in the order received and space/class available. If a space becomes available, families are required to fill out an enrollment application and pay the deposit and registration fee. Families must make contact within three days of notification and five days to turn in all applicable materials.

For questions, please contact Dee at 612-825-1519.