



Christian Preschool Waiting List

Please note: This application does not imply acceptance. This application indicates interest in the preschool program only. All openings will be filled according to the number of children in classroom, days available and date entered on this form.

Date: _____

Child's Name _____ Date of Birth _____
Male Female Potty Trained: Yes No

Parent/Guardian _____

Phone (Home) _____ Phone (Work) _____

Phone (Cell) _____ E-mail _____

Address _____ Zip _____

What is the Primary Language spoken at home? _____

How did you hear about our Preschool? _____

Religion and/or church affiliation: _____

Attendance Option Preferred: M/W/F _____ T/Th _____ M-F _____
 Full Day 8:30 am - 3:00 pm All Day 6:30 am - 6:00 pm

KidZone Christian Preschool will be available for drop-off anytime after 6:30 am, pick-up no later that 6:00 pm. Our school day will begin at 8:30 am.

Comments: _____

Form must be signed by a responsible party.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Please return this form to our church office or you can mail it to:
P.O. Box 4444 Santa Fe Springs, Ca 90670

Comments _____

