



Culpeper Baptist Child Development Center, Inc.

318 S. West St., Culpeper, VA 22701 * (540)825-9798 * www.culpepercdc.org

WAITING LIST APPLICATION

****Note – If you have multiple children please complete one form per child****

Date of Application: _____ Are you a current CDC family? _____

Child's Name: _____ DOB: _____

Parent's Name(s): _____

Address(es): _____

Parent's Phone #: Home: _____

Cell: _____

Work: _____

Parent's Email: _____

Program Choice

(Please select one):

Infant A (Birth to Mobile): _____

Infant B (Mobile to 18 Months): _____

Toddler I (18 Months to 2 ½): _____

Toddler II (2 ½ - 3 **Not** Potty-Trained): _____

Preschool (2 ½ - 3 Potty-Trained): _____

Preschool/Pre-K (3 year olds): _____

Preschool/Pre-K (4 year olds): _____

Junior Kindergarten (4/5 year olds) _____

Elementary: Grade: _____

Full-Time

Part-Time

(Please indicate which days):

Not Available

Not Available

Not Available

Not Available

I, _____, do hereby authorize Culpeper Baptist Child Development Center to add my child, _____, to the current waiting list for the program I have chosen above. Also, I understand that when I am contacted by Culpeper Baptist Child Development Center staff regarding an available space and I do not respond within forty-eight (48) hours, my child will either (1) be moved to the bottom of the current list; or (2) be removed from the list, at the discretion of the CDC's administrative staff. Your child will remain on the waiting list for twelve (12) months and will automatically be removed unless you do contact us, via email or phone, to reaffirm that you want your child to remain on the CDC waiting list.

Parent Signature

Date

FOR OFFICE USE:

Date application received & placed on list: _____ Signature: _____

Date contacted regarding available space: _____ Signature: _____

Communication comments: _____