

Wesley Christian Child Development Center
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Waiting List Registration Form

There is a \$25 yearly *non-refundable* fee to be on the waiting list.

Application Date: _____
Child's Name: _____
DOB: _____
Address: _____
Home Phone: _____

Contact Name: _____
Work: _____
Address: _____
Phone: _____
Cell: _____
Email: _____

Child Lives With: _____
Has your child attended day care before? _____
How did you hear about us? _____
Date Care Needed: _____

FOR OFFICE USE ONLY
Date: _____ Check number: _____ Cash: _____
Waiting list fee paid: _____
Accepted: _____
Starting date: _____

***Placement on the waiting list is not perpetual. One year from the date of application, children's names will be removed from the waiting list. If you would like your child to remain on the waiting list you must fill out a new application and pay \$25. Once your child is enrolled you will need to complete a more detailed and informative second application, sign a tuition contract and furnish a medical form which includes immunization record and recent physical examination.*

SUBMIT