



Waiting List Registration Form

Please print clearly and fill one out for each child

Child's Name _____

Gender, if known _____ Date of Birth or Due Date _____

Parent or Guardian Name _____

Address: _____

Phone: _____ Email Address _____

Please check the class you would like to be wait-listed for:

- Little Lambs Room(Infants)
- Safari Room(Toddler 1)
- Bears Room(Toddler 2)
- Sunshine Room(Pk3)
- Honey Bees Room(Pk4)

Has a tour been scheduled for your child? Y or N

Tour Date _____

Please mail this form to:

or

Email to:

Child Development Program

Re: Wait List

4505 S. Claiborne Ave

New Orleans, La 70125

kid@cdpkid.com

Subject: Wait List Registration