

Waitlist Agreement Form

Date:	_ Parent/Guardian Nam	e:
Phone Number:	Emc	ail:
Child's Name:		DOB:
Child's Name:		DOB:
By signing this consent	form, Parents/Guardians agree th and understand the terms of th	ney have read the following information is agreement:
family is required. The registration are no longer reconstruction. Lullaby Inn is dealways do our lead however we are classroom. The registration services begind policy handbook. The registration payment. Pare following the 2-deal parents/Guard enrollment data. Tuition rates income are that was a	ed to be placed on the waiting fee will not be refunded if it is needed. Edicated to meeting the need pest to provide the most according to the needed of the most according to the provide the most according to the notion of the space of the second of the	determined that childcare services ds of prospective families and will urate timeframe for enrollment ce may be available in your child's uition payments once childcare activity fee is outlined in the parent yearly basis. y 24 months from the date of d to pay the registration fee again
Parent/Gu	ardian Sianature	 Date