

Roots & Branches Childcare Center

WAIT LIST FORM

Parent Name(s) _____
& Address _____

Home Phone _____

Work Phone _____

Email Address _____

Child's Name _____ DOB _____

_____ DOB _____

_____ DOB _____

Desired Schedule: (please circle the days)

Monday Tuesday Wednesday Thursday Friday

Drop off time _____ Pick up time _____

Preferred Enrollment Date (month & year) _____

This form must be completed and sent to Roots & Branches daycare center to have your name put on the wait list.

The Director will contact you when an appropriate space for your child is available. The waiting list is maintained in age groups according to the date that this form is received. Your form will automatically be moved up in age groups as your child increases in age.

Please feel free to call to check on your status on the waiting list and/or our best predictions for future openings.

Please let us know if you find alternative care and would like your name removed from our list. It might help someone else get the care they need sooner.

Thank you for your interest in Roots & Branches. You will be contacted as soon as there is availability for your little one. We strive to provide excellent care in a safe, happy and age appropriate space. Thank you for your patience.

Parent Signature

Director signature

date

Roots & Branches Director Emily Karl e-mail: karle@frederic.k12.wi.us
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