



# Piedmont Child Care Center

## PRE-ENROLLMENT FORM

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Program: \_\_\_\_\_

The schedule requested for my child is as follows:

Type of Enrollment:  Full-Time  Part-Time  Before/After School  Drop Off \*

# of Days:  One --  Monday  Tuesday  Wednesday  Thursday  Friday

Two --  Monday  Tuesday  Wednesday  Thursday  Friday

Three --  Monday  Tuesday  Wednesday  Thursday  Friday

Four --  Monday  Tuesday  Wednesday  Thursday  Friday

Five --  Monday  Tuesday  Wednesday  Thursday  Friday

Expected Start Date: \_\_\_\_\_

\* Please call ahead for available space.

- Disclaimer:*
1. *There is no charge for placing your child on our wait list.*
  2. *Completing this form does not guarantee that your child will be admitted to Piedmont Child Care Center.*
  3. *Children accepted on a part-time basis may have to buy a full-time space, find a child who can complete the week, or withdraw if the classroom reaches full capacity and a family needs a full-time space.*

**Where did you hear about PCCC? Word of mouth or newspaper** \_\_\_\_\_  
*(which newspaper)*