



Kids' Corner Day Care Center, Inc.

Bilingual Non-Profit Community Organization

Wait List Application Form

CHILD Information

First Name (TBA)	Middle Int.	Last name	(Expected) / Date of Birth	Sex
Address			Home Phone	

Parents/ Guardians Information

1. Parent Name	Home Address	Phone or Cellular
2. Parent Name	Home Address	Phone or Cellular

Agreements

- I agree that this is not a legal or binding contract of enrollment for Kids' Corner DCC.
- I agree to follow up with phone calls and emails from Kids' Corner regarding space availability.
- Upon notification from Kids' Corner that space is available (typically a 1-month advance window is given) I agree to give reply and registration deposit within 10 business days or forfeit the space available.

Signature: _____

Date: _____

For Office Use

Is the waiting child a sibling of a family already enrolled with Kids' Corner? Yes No	
What is the projected date that care is needed by? (starting at 6 mo.)	
Will this child be on DC Voucher -tuition assistance? Yes No	
Comments:	Date: Decline Age: Accept Roll to next group? Y N
Comments:	Date: Decline Application Removal reason:
Tour Date:	Registration Forms Given by:
Date Enrolled:	Registration Fee Paid: Y N Class : B-

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