

PALMA CEIA PRESBYTERIAN PRESCHOOL

Waiting List Application

3501 W San Jose Street ~ Tampa FL 33629 ~ 813-251-6492

preschool@palmaceia.org

INSTRUCTIONS:

1. Please read and complete the entire application.
2. A **non-refundable** fee of **\$25.00** is required for placement on the waiting list. Return the completed form with your check payable to **Palma Ceia Presbyterian Preschool**.
3. Complete your application by registering for and attending a tour of the preschool, available monthly. Contact the preschool to register for the next available tour date.

Child's Name - First: _____ MI: _____ Last: _____

Date of Birth: ____/____/____ Gender: _____

Mother's Name: _____

Father's Name: _____

Street address: _____

Street address: _____

City: _____ Zip code: _____

City: _____ Zip code: _____

Daytime Phone: _____

Daytime Phone: _____

Email of Mother: _____

Email of Father: _____

Does child have any special needs of which you are aware? _____

If so, please explain? _____

Desired date of enrollment: _____

Member of Palma Ceia Presbyterian Church? _____ (yes) _____ (no)

My signature below indicates I acknowledge the following:

- It is my responsibility to notify PCPC Preschool of any changes to this information.
- PCPC Preschool communicates primarily via email and the website.
- My waiting list application is complete only after I have attended a tour.
- This completed waiting list application is not a contract to enroll at PCPC Preschool.
- On or before the designated deadline, a valid DH-680, Florida Certificate of Immunization, is required for school entry and attendance. PCPC Preschool does not accept DH-681, Religious Exemption From Immunization, in lieu of a valid DH-680.
- I have read the PCPC Preschool Handbook (<http://palmaceia.org/preschool/handbook>), understand the school regulations and guidelines, and wish to place my child on the waiting list for the program.
- If a space for my child becomes available, I will be notified by phone or email. If I do not respond to notification within 48 hours, the space will be offered to another family.

PARENT SIGNATURE: _____ DATE: _____

Staff Use Only:

Date of Fee and Waitlist Application Submitted: _____ Staff Initials: _____

Date Tour Completed: _____