

# 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.

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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 in writing 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: \_\_\_\_\_

Version Date: 12/11