

**His Kids Child Care Center**  
**Waiting List Application**

Date of Application \_\_\_\_\_ Received By \_\_\_\_\_

This application is not a guarantee of acceptance, but will initiate the process to have your child considered for enrollment into His Kids. We can make no absolute promises as to the date of an opening for your child. We will do everything possible to accommodate your needs. It will be necessary for you to stay in contact with our office should your needs change. Feel free to call every couple of weeks for an update on the standing of this application. A **\$25 non-refundable application fee** is required at the time you submit this application. When and if we are able to accommodate your child, your registration fee will be reduced by this amount.

**Child's Information**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Parental Information**

Mother \_\_\_\_\_

Father \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Member of any church? Yes \_\_\_\_ No \_\_\_\_ If yes, where? \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

Inquiry \_\_\_\_\_ Date \_\_\_\_\_

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