

Trinity United Methodist Church

Trinity Infant & Child Care Center at Village
Gardens

7130 Kentwell Lane Lincoln NE 68516

Waiting List Application

| T / NI | E. AM | | |
|---|-------------|-----------|--|
| Last Name: | First Name: | | |
| Date of Birth: | Gender: | Nickname: | |
| Home Address: | | | |
| City: | Zip: | Phone: | |
| Parent/Guardian: | | Email: | |
| Home Address: | Zip: | Cell: | |
| Employer: | | Phone: | |
| Parent/Guardian: | | Email: | |
| Home Address: | Zip: | Cell: | |
| Employer: | | Phone: | |
| Fulltime Child Care Preschool 3yr old Preschool 4/5yr old | | | |
| Hold Fee Date: | Check # | Amt. Pd. | |
| Approx Due Date: | Date Car | e Needed: | |
| Hold Fee Policy – A deposit of \$25 must accompany each application for enrollment. This fee is applied to the first week's tuition. If the space is not accepted by the parent/guardian or the parent/guardian withdraws from the waiting list, \$15 will be refunded. The parent/guardian shall reapply if further consideration for enrollment is desired. | | | |

| Signature | Date |
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