

**St. Thomas Aquinas Catholic Church ~ Child Development Center
Wait List Form**

Date: _____

Desired Start Date: _____

Parishioner: Yes No

Current Family: Yes No

Parents' Names: _____

Child's Name: _____

Child's DOB: _____

Child's Name: _____

Child's DOB: _____

Home Ph. #: _____

Cell Ph. #: _____

Home Address: _____

Email: _____

Full Day *OR* *Part Day: M – F MWF TTH*

Classroom: _____

Classroom: _____

<p style="text-align: center;">Wait List Fee \$25.00 Per Child</p> <p>Date _____</p> <p>Ck # _____</p>
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Please note: Current CDC Families and St. Thomas Aquinas Parishioners receive wait list priority. If you choose not to accept a place within our center when offered, you will have the choice to be taken off the list or be placed at the bottom of the list. The \$25 fee is non-refundable and does not go towards other fees.