

**Waitlist Form (no deposit necessary)**  
**Intent to Enroll (include non-refundable deposit)**



Center		Today's Date	
Child's First Name		Last Name	
Gender	Birth Date	Entering Grade	
Male    Female			

**Parent/Guardian Information**

Name	Name
Employer	Employer
Work Phone	Work Phone
Cell Phone	Cell Phone
Email	Email
Address	

How did you hear about CCP?
Is your child currently at a CCP center? (circle)    YES    NO                      If Yes, which center?
Is your child currently on a waitlist for another CCP center? (circle)    YES    NO    If Yes, which center?
Days of care needed (circle)    Monday    Tuesday    Wednesday    Thursday    Friday
Please list hours of care needed:
Desired start date:
Intent to Enroll Deposit Amount 50% one month's tuition (check, ACH ok):

***\*Non-refundable intent to enroll deposit does not guarantee a space. Enrollment is based upon availability. If you decide to not enroll your child at a CCP program you will forfeit the deposit. If CCP does not have a space available at your desired start date the deposit will be refunded.\****

Parent/Guardian Signature:
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