

Crescent Park Child Development Center Enrollment/Wait List Form

Today's Date _____ Email _____
Desired Start Date _____
Child's Name _____ Birthdate _____ Gender _____
Address _____ City _____ Zip _____
Mother's Name _____ Home or Work # _____ Cell # _____
Father's Name _____ Home or Work # _____ Cell # _____

Has your child ever been in a preschool, playgroup, or day care setting? How long? What was the experience like?

Is there anything special we should know about your child? Health or developmental issues? Allergies, fears, parental concerns?

Please check the space that best describes your child, related to toilet training:

_____ Completely toilet trained (all day, including nap/rest time)

_____ Almost toilet trained (needs reminders/help)

_____ Not toilet trained at this time

I am interested in the following program:

___ Toddler Program [for ages 18 – 24 months]: Part day from 9 – 11:30AM
(mark choice below with 1st and 2nd preference)

___ Monday & Wednesday schedule

___ Tuesday & Thursday schedule

___ Preschool Program (circle program choice below and list by 1st and 2nd preference)

Full Day Program is from 8AM – 6PM

Part Day Program is from 9AM – 1PM

___ 5 Full Part days per week (M-F)

___ 3 Full Part days per week (list days desired) _____

___ 2 Full Part days per week (list days desired) _____

Mail To: Crescent Park Child Development Center, 4161 Alma Street, Palo Alto, CA 94306 along with a \$35.00 non-refundable application fee. Contact tierney@crescentparkpreschool.org with any questions.