

FamilyU Request (Wait List)

Child's Name _____ Grade _____

_____ Full Year, list month & year requested start date: _____
(Includes school year and summer months. It is expected that 2 weeks' notice be given before ending participation.)

Contact Cell Number _____

Contact Email Address _____

* Wait List priority is by date this form is received.

*Students who stop care during the summer or during the school year will need to reapply for an open spot by filling out this wait list form and take their place on the wait list.

*Attach check for 2 weeks of tuition. (\$60 -- school year, \$160.00 – summer with morn rec, \$230—summer full days) This is payable to SMOC at the time of this request. The check will be deposited and used toward tuition when a spot opens up.

*We want the wait list to be a valid, current list—therefore this deposit should be made with the understanding that when there is an opening, your child is committed to taking the open spot. Checks will be held until there is an open spot, or if you decide that you no longer need the spot call us and we will return the check. **Typical movement/drop times for kids in and out of FamilyU are August 20 and May 20.*

Signature _____ Date _____

Parent Name (print) _____