

# Sea Breeze School Waiting List Application for Admission

900 Edgewater Blvd., Foster City, CA 94404; E-Mail: admin@seabreezeschool.com; www.seabreezeschool.com 650-574-5437

Child's Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ M \_\_\_ F \_\_\_  
Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Place of Birth: City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Father \_\_\_\_\_ Cell Ph: \_\_\_\_\_ Mother \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Email Address Father: \_\_\_\_\_ Mother \_\_\_\_\_

### **Priority Reg Information (if applicable):**

Applicant is sibling of current student: Yes \_\_\_ No \_\_\_ Student's Name \_\_\_\_\_

Applicant is sibling of former student: Yes \_\_\_ No \_\_\_ Student's Name \_\_\_\_\_

Applicant is Alumni of Sea Breeze: Yes \_\_\_ No \_\_\_ Year Attended \_\_\_\_\_

Applicant is a member of St. Ambrose Church: Yes \_\_\_ No \_\_\_

Applying for School Year 20\_\_\_\_ - 20\_\_\_\_

**Early Arrival** \_\_\_ 7:30 - 8:15 (all ages)

### **Pre School I**

Age Requirement: 3 years by December 2 of School Year enrolled

\_\_\_\_\_ 5 days  
Hours: \_\_\_\_\_ 8:30 - 12:30  
\_\_\_\_\_ 8:30 - 3:30  
\_\_\_\_\_ 8:30 - 6:00

### **Pre School II**

Age Requirement: 4 years by December 2 of School Year enrolled

\_\_\_\_\_ 5 days  
Hours: \_\_\_\_\_ 8:30 - 12:30  
\_\_\_\_\_ 8:30 - 3:30  
\_\_\_\_\_ 8:30 - 6:00

### **Transitional Kindergarten**

Age Requirement: 5 years by March 2 of School Year enrolled

\_\_\_\_\_ 5 days  
Hours: \_\_\_\_\_ 8:30 - 1:30  
\_\_\_\_\_ 8:30 - 3:30  
\_\_\_\_\_ 8:30 - 6:00

### **I understand that:**

1. A check for \$75.00 must accompany this application. **Waiting List fee is not refundable.**
2. Applications will be dated on receipt.
3. A \$50.00 processing fee will be charged **for each schedule adjustment** once you have accepted your child's class schedule for the year. **Acceptances/Notifications will be communicated via email. You must respond with in 24 hours and begin registration to hold your child's spot.**
4. It is your responsibility to keep this application up-to-date with your address, telephone number, email, etc.
5. Registration is subject to priority placement (Current students, siblings, and members of St. Ambrose).

**Submittal of this application in no way guarantees that your child will be placed.**

**Office Use:** Check # \_\_\_\_\_ Check Date \_\_\_\_\_

Cash \_\_\_\_\_ Date Cash Rec'd \_\_\_\_\_

\_\_\_\_\_  
**Signature of Parent**