



Le Petit Elephant wait List Application

Today's Date	
Parent(s) NameS:	
Child's Name:	
Child's Date of Birth:	
Email Address:	
Phone Number:	
Address:	
DeSired Enrollment/ Start Date:	
Child's Age at Enrollment	
DeSired Schedule:	PreSchool or Infant/Toddler Care (circle one) <input type="checkbox"/> Monday-Friday 7:30am-5:30pm or other time: _____ <input type="checkbox"/> Mon/Wed/Fri 7:30am-5:30pm or other time: _____ <input type="checkbox"/> TueS/ThurS 7:30am-5:30pm or other time: _____
Fee	\$100 wait list fee (non-refundable) ★ Please make checks payable to "Le Petit Elephant" and mail to 2645 Laurel St. Napa CA 94558 or drop off to the office Check enclosed Check # _____

When a space becomes available in our program, you will be contacted if your requested schedule and start date match with our availability. You will be contacted via email, and if you do not respond within 3 days, we will move to the next person on the wait list.

Thank you for joining our wait list, we will be in touch!

-Le Petit Elephant Nursery and PreSchool