



## APPLICATION FOR ENROLLMENT

Name of Child \_\_\_\_\_ Date of Birth (or due date) \_\_\_\_\_

Previous nursery/child care experience: \_\_\_\_\_

I am applying to:

\_\_\_\_\_ **The Giving Tree – Logan Square** : 232 N. 22nd St. Philadelphia, PA 19103

\_\_\_\_\_ **The Giving Tree – Queen Village**: 420 Bainbridge St. Philadelphia, PA 19147

\_\_\_\_\_ **Both Wait lists**

Guardian 1:	Guardian 2:
Home Address:	Home Address:
City, State, Zip:	City, State, Zip:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Work Phone:	Work Phone:
Email Address:	Email Address:

Have you been in for a tour of the facility yet? \_\_\_\_\_

I wish my child to be enrolled in:

\_\_\_\_\_ Full-time Program (5) Days

\_\_\_\_\_ Part-time program: Mon \_\_\_\_\_ Tue \_\_\_\_\_ Wed \_\_\_\_\_ Thu \_\_\_\_\_ Fri \_\_\_\_\_

\_\_\_\_\_ 8:00am – 3:00pm

\_\_\_\_\_ 8:00am – 6:00pm

Desired date of enrollment: \_\_\_\_\_ Signature of Parent: \_\_\_\_\_

**Please return application with a one time, non-refundable application fee of \$100. Make checks payable to the Giving Tree and mail application to the location you are interested in. This application gets you on the waitlist but does not guarantee enrollment.**

Please let us know how you heard about The Giving Tree.

Internet: \_\_\_\_\_ Word of Mouth: \_\_\_\_\_ Advertising: \_\_\_\_\_ Local event: \_\_\_\_\_ Other: \_\_\_\_\_

For Official Use Only:

Date of Receipt of Application \_\_\_\_\_ Start Date: \_\_\_\_\_

