

Today's Date: _____

Projected Enrollment: _____

Check # for Registration Fee or date of online payment: _____

We  Nature!

**Epiphany
Preschool**

1014 Country Club Dr. NE

Vienna, VA 22180

@viennaepiphanypreschool

Waitlist Form

Please write legibly and do not leave any spaces blank.

Child Information

Child's Name (First, Last)	Nickname	Birth Date (MM/DD/YY)	Child's Current Age
Primary language(s) spoken at home	Sex: M F	Primary Phone #	Child's Age at Projected Enrollment
Address:		Name of previous school or child care attended. If none, write 'none'	

Parent/Guardian Information

Parent 1's Name (First, Last)	Employer	Work Phone #
Home Address		Cell Phone # Email:
Parent 2's Name (First, Last)	Employer	Work Phone #
Home Address (write 'same as above,' if applicable)		Cell Phone # Email:

General Information: Please circle the appropriate answer

Is your child potty trained? Yes No In the process of learning	Date of tour with our school:
Is your child currently receiving any support services? No Yes (please describe): _____	

How did you hear about our school?

Referral

Online Search

Social Media

Other: _____

Please submit this form to us along with a non-refundable \$100 payment to secure your spot on our Waitlist. If offered a spot, the Waitlist Fee will be applied to the Registration Fee. Waitlist forms are only considered complete if all fields are filled out, and includes waitlist fee.