



Maple Leaf Children's Center

P.O. Box 148
Thetford, VT 05074
802.785.2074

Wait List Application

A non-refundable \$25.00 check or money order must accompany this form in order to be processed. You will be contacted regarding your space on our Waiting List. Once a space is available and offered to you, we will request a non-refundable \$100 deposit that will count towards last month's tuition.

Parent(s) Name(s): _____

Mailing Address: _____

Parent / Guardian's Phone Number: _____

Parent / Guardian's Phone Number: _____

Child's Name: _____ D.O.B. ____/____/____

Child's Name: _____ D.O.B. ____/____/____

How did you hear about Maple Leaf? _____

When would you like your child(ren) to begin attendance: _____

Are you flexible if preferred space is unavailable? YES NO

	Mornings (7:15-12:30)	School Day (7:15-3:15)	Full Day (7:15-5:30)
M	_____	_____	_____
T	_____	_____	_____
W	_____	_____	_____
TH	_____	_____	_____
F	_____	_____	_____

**Admission Policy: Maple Leaf is open to any child within our age specifications, regardless of physical ability, race, faith, or ethnic origin. Tuition is paid monthly on the first day of each month prior to care given. Withdrawal from the program requires THREE (3) weeks notice. Sick days and vacations cannot be deducted or refunded. Maple Leaf closing dates provide staff with paid holidays and training and are therefore not deducted or refunded from monthly tuition payments. *Withdrawal: Written notice, or THREE (3) weeks is required for a child to be withdrawn from our program. Failing to give such notice will result in responsibility to pay tuition regardless of your child's attendance. We do not pro-rate the final month of attendance.*