**Waitlist Application**

BUMC Early Learning Center

309 Franklin Road

Brentwood, TN 37027

615-324-8202

Date of Application:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Requested date of Attendance:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child’s Information**

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Information**

Mother’s Full Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Full Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check all that apply:**

\_\_\_\_\_\_\_\_\_I have a sibling currently enrolled at BUMC Early Learning Center

\_\_\_\_\_\_\_\_\_I have child who previously attended BUMC Early Learning Center

\_\_\_\_\_\_\_\_\_I am a member of Brentwood United Methodist Church

\_\_\_\_\_\_\_\_\_I am or my spouse is serving in the military or on active duty

***\*Priority system: Siblings of currently enrolled ELC children have first priority, followed by alumni, then members of BUMC, followed by all other applicants.***

***\*It is important to know that the ELC cannot predict a start date at the time of application. This waitlist application and fee does NOT guarantee a spot.***

***\*We make every attempt to get families in at their desired start date. But it is not guaranteed. Often, families do have to wait longer. But if a spot is offered before you need it, you will be presented with the option to pay to hold the spot. If you decline, we will fill the spot with someone else and you will stay right where you are on the waitlist.***

**Please return this completed application form with $100 per child to the Center office by mail. Checks should be made out to BUMC ELC. *This fee is non-refundable.* Please let us know if your contact information changes. When a spot does become available, we will email the family at the top of the waiting list. *If no response is received within 24 hours, the next family on the list is offered the space.* We appreciate your prompt response!**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Office Use Only**

Date Received:\_\_\_\_\_\_\_\_\_\_\_ Application Fee Received:\_\_\_\_\_\_\_\_\_\_\_\_ Check #\_\_\_\_\_\_\_\_\_