

Date submitted: _____

Registration Pd: Yes No

YMCA Early Childhood Program Waitlist Request Form

Please complete this form and email to Mendy Cattoor mcattoor@ymcamqt.org to be added to the applicant list.

Child's First and Last Name	Child's DOB	Desired Start Date
Parents First and Last Names	Home Phone	Other Phone
Address, City, State, Zip		
Email Address		

Desired Schedule Full Time Schedules Have Priority

Day	Estimated Drop-Off Time	Estimated Pick-Up Time
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Placement on the waitlist does not guarantee you a spot on your desired start date. We will, however, do our best to accommodate you and your child. As openings are available, it is our policy to call in the order of the waitlist.

Do you have Child care subsidy? YES NO

