Revised 1/27/23
For Office Use Only – Date/By
Request Received
Office Personnel

## FamilyU Request (Wait List)

Child's Name	Grade
Full Year, list month & year requestion (Includes school year and summer notice be given before ending partic	nonths. It is expected that 2 weeks'
Contact Cell Number	
Contact Email Address	
* Wait List priority is by date this form is red	ceived.
*Students who stop care during the summoneed to reapply for an open spot by take their place on the wait list.	· ·
*Attach check for 2 weeks of tuition. (\$80 - morn rec, \$310—summer full days) of this request. The check will be de when a spot opens up.	This is payable to SMOC at the time
committed to taking the open spot. open spot, or if you decide that you	then there is an opening, your child is
Signature	Date
Parent Name (print)	