



302 West Whitner Street ~ Anderson, SC 29624
Waiting List Application

Date of Request: _____

Information:

Child's Name: _____ Sex _____

Date of Birth: _____ or Expected Date of Birth: _____

Mother's Full Name: _____

Mother's Employer: _____

Mother's Phone Numbers: (Home): _____ (Work): _____ (Cell): _____

Father's Full Name: _____

Father's Employer: _____

Father's Phone Numbers: (Home): _____ (Work): _____ (Cell): _____

E-Mail: (Home): _____ (Mother Work): _____

(Father Work): _____

First Presbyterian Church Member? Please check: Yes _____ No _____

Date you would like your child to begin our program: _____

How did you hear about us? _____

Comments / Questions: _____

This application does not guarantee a spot for your child, but keeps your child's name on our waiting list. You will be notified by phone if a spot becomes available.

This application is good for one year from date filled out. Please call the Day School (864) 225-2551 to re-new your application if your child has not received a spot within the first year. If we do not hear from you, your application will be put in our in-active file for 6 months, and then discarded.

Return this form to the Attention of: Day School Director
E-mail: DaySchoolDirector@FPCAndersonSC.com OR Fax: 864-225-2552 OR by Mail.