



**Avondale**  
 Presbyterian Church  
 Children's Center

# Avondale Children's Center

## Preliminary Application

Application Date:	Requested Start Date:	Application Fee: Follow Up: (office use only)
Child's Last Name:	Child's First Name:	
Child's Age:	Child's Birthdate:	
2nd Child's Last Name:	2nd Child's First Name:	Waitlisted/Classroom:
2nd Child's Age:	2nd Child's Birthdate:	

Mother's Name:	Father's Name:
Mother's Address:	Father's Address (if different):
Mother's Phone Numbers: Home: Cell: Work:	Father's Phone Numbers: Home: Cell: Work:
E-mail:	E-mail:

**Additional Information:**

How did you hear about Avondale? (if you were referred to us, please tell us who referred you)

Would you be willing to pay to hold space?    Yes    No

Do you have a home church?    Yes    No

If yes, where? \_\_\_\_\_

Note: Receipt of this application does not guarantee enrollment. Enrollment will be confirmed based on classroom space available, requested start date and prior applications. You must call periodically to update your application. If we do not hear from you in 12 months, we will remove your application from the waiting list. Siblings, church members and referrals have enrollment priority.