



EARLY CHILDHOOD APPLICATION FOR ENROLLMENT

Date: _____

Child's full name _____ Birthdate: _____ Gender: _____
(month/date/year)

Desired date of school entrance: _____

Check preference:

- Monday-Friday
- Monday /Tuesday/Wednesday
- Thursday/Friday

Check length of day:

- 8am-5pm
- 8am-2:30pm
- 8am-12pm

How did you hear about the White Mountain Waldorf School?

- Friend
- Website
- Print
- Facebook
- Other

Full name of parent 1: _____ (C)Phone number: _____

Email address: _____ (H)Phone number: _____

Home address: _____

Occupation: _____ Name of employer: _____

Full name of parent 2: _____ (C)Phone number: _____

Email address: _____ (H)Phone number: _____

Home address: _____

Occupation: _____ Name of employer: _____

Parents are: married separated divorced share custody single

If parents are separated or divorced;

Child lives with: _____

Correspondence should be addressed to: _____

Please include a \$40 non-refundable application fee: cash credit check # _____

Applications are considered complete when all the steps of the Admissions Checklist are finished.
 All programs contingent upon adequate enrollment.