



Waiting List Registration Form

Child's Name _____ **Due Date/ Date of Birth** _____

Parent 1:

Name _____ Cell Phone _____
 Employer _____ Work Phone _____
 Preferred Email _____
 Home Address _____

Parent 2:

Name _____ Cell Phone _____
 Employer _____ Work Phone _____
 Preferred Email _____
 Address: Same as Parent 1 Secondary Address _____

DUMC church members? Yes or No **DCDC Sibling?** Yes or No

How did you hear about DCDC? _____

Waiting List Procedures

1. Tour the facility
2. To be placed on the waiting list, a parent/guardian must submit a waitlist registration form with a \$50.00 non-refundable waitlist registration fee. When the child is accepted for enrollment, the fee will be applied to the \$100.00 enrollment fee. Please make checks payable to DCDC.
3. Please email dcdc@carolina.rr.com with any information changes and when your baby is born.
4. DCDC will contact you when a space is available for enrollment. This may take some time, as our waiting list is **typically** eighteen months to two years. There is a priority waiting list for church members and siblings currently attending DCDC.
5. If you have questions regarding the waiting list or enrollment processes, please email our assistant director Anita Burriss Shoffner at dcdc@carolina.rr.com.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

For Office use :

	Date	Comments
Waitlist registration		
Update		
Update		