

Children's Weekday Education Program
Waiting List Application
200 E Parkway N Memphis TN 38112
901-454-1131

Today's Date: _____ Due Date: _____ Desired Enrollment Date: _____

Child's Name: _____ Date of Birth: _____ Age: _____

Mother's Name: _____

Address: _____ City: _____ Zip: _____

Home Phone#: _____ Cell Phone #: _____

Mother's Employer: _____ Work Phone #: _____

Father's Name: _____

Address: _____ City: _____ Zip: _____

Home Phone#: _____ Cell Phone #: _____

Father's Employer: _____ Work Phone #: _____

Please provide an e-mail address so that we may contact you with any available openings or other information. _____

I have read and understand the following:

1. This form and a non-refundable fee of \$50.00 will secure a place for my child on the Waiting List. It does not guarantee enrollment or specific enrollment date. I understand that this application will expire 1 year after today's date.
2. Priority is given to siblings of First Baptist Children's Weekday Education Program.
3. It is my responsibility to inform the CWEP of any changes in address, contact numbers or desired enrollment date.

Parent's Signature: _____ Date: _____

Please turn over and circle the type of registration that you prefer.



Please circle your preference.

Days, Hours and Fees:

2days = Tues/Thurs; 3days = Mon, Wed, Fri; 5days = Monday thru Friday

Schedule & Fees For Infants

7:30—3:00

2 Days-\$315.00

3 Days-\$415.00

2 Days-\$560.00

9:00—3:00

2 Days-\$250.00

3 Days-\$345.00

2 Days-\$460.00

Schedule & Fees For Toddlers

7:30—3:00

2 Days-\$305.00

3 Days-\$395.00

2 Days-\$530.00

9:00—3:00

2 Days-\$240.00

3 Days-\$325.00

2 Days-\$430.00

Schedule & Fees For Pre-schoolers

7:30—3:00

2 Days-\$290.00

3 Days-\$375.00

2 Days-\$495.00

9:00—3:00

2 Days-\$225.00

3 Days-\$305.00

2 Days-\$395.00