



Wait List Application

Thank you for choosing to add your child to the Early Learning Center of Aspen's waitlist. In order to secure your child's spot on the list, please complete this waitlist application. You may submit your application via mail, sent to 215 N Garmisch St. Aspen, CO 81611, or by email to waitlist@earlylearningaspen.com. If you would like to tour our facilities please call (970) 920-9201 to set up an appointment.

The Early Learning Center is a full-day, year-round school. The waitlist is always open, however, please know that enrollment opportunities depend on available spaces and your child's age. Siblings of currently enrolled and former students who graduated from our program and staff member children are given priority. Thereafter, applicants are considered by the date of completion of this application. We do not offer short-term care for classrooms with a waitlist. We ask for you to consider if you are wanting your child to attend the Early Learning Center for the length of their Early Childhood Education. If your child is accepted as a student, a continuous care deposit of \$500.00 is due within a week of being offered enrollment. Please see our continuous care policy for details. This deposit holds your child's space and is non-refundable if you choose not to move forward with care.

Each May, please contact the Early Learning Office to inform us if you would be still interested in care at the Early Learning Center. Thank you for your interest in the Early Learning Center.

CONTACT INFORMATION

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

Parent/Guardian: _____
Phone (cell) _____ Phone (work) _____
Email _____
Address _____

Place of Employment: _____

Parent/Guardian: _____
Phone (cell) _____ Phone (work) _____
Email _____
Address _____

_____ Place
of Employment: _____

ATTENDANCE REQUEST

Preferred Starting Date _____

Preferred Attendance: _____

How did you hear about the Early Learning Center of Aspen?



Is the Early Learning Center your top school choice for your child, and if so why?

If foreseeable, do you intend to have your child attend the Early Learning Center through their Early Childhood Education Experience or just for infant care? Do you plan on switching programs when your child is at the age where they can enroll in a program that does not offer infant care? (This information helps us to plan accordingly)

Please let us know any additional information that you would like us to know about your child and family.

Initial each of the following:

- _____ Even though I have chosen a preferred start date for my child I understand that openings are offered as they become available. I understand that there is no guarantee that an opening will be available on my preferred date and that I could be offered start dates that is different from my preferred date. Most openings occur during the summer or early fall.
- _____ The Early Learning Center does not hold unpaid enrollment spaces.
- _____ I understand that I could be offered an attendance option that is different from my preferred choice. If enrolled I can request different days for attendance and when they become available the schedule can change.
- _____ I understand that Early Learning Center will only be able to hold an offered space for 48 hours. If I do not confirm that I am accepting the offered space within 48 hours, that space will be offered to a different family.
- _____ I understand that I need to check in with the Early Learning Center every six months so that the Early Learning Center knows I am still interested. Checking in more often does not increase ones likelihood of receiving a space.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Office Use: Received by _____ Date _____