Union Child Enrichment Center WAIT LIST FORM

Parent Name(s)		
Address(es)		
Home Phone(s)		
Work Phone(s)		
Email Address(es)		
Child's Name	DO	В
	DOI	В
Desired Schedule		
Preferred Enrollment Date(month/yea	ar)	_
This form does not guarantee enrollm space is available. You may schedule required to visit the center prior to en	e a visit at any time prior to enrollmen	t while on the waitlist and are
Refusal of a particular spot in the pronext spot opens, we will contact you		ion on the waitlist. When the
The waitlist is maintained in age grou child will automatically be moved up		
Please feel free to call or email to che future openings.	eck on your status on the waitlist and/	or our best prediction for
Please let us know if you find alternat help someone else get the care they r		noved from our list. It might
Parent Signature	Center Rep. Signature	Pre-reg Date

UCEC Email:

Heather.ucec@gmail.com

Mailing Address:

Union Child Enrichment Center/6703 Washington Pk/Knoxville TN 37918

Phone: (865) 333-5828