

Date called or visited _____

WEE CARE DAY CARE WAITING LIST FORM

To request a spot for your children in our program please print this form, form and mail to:

Wee Care Day Care
1570 Eustis Street
St. Paul, MN 55108

Questions? Please call 651-641-3598

Child's name _____ Child's birth date _____

Child's name _____ Child's birth date _____

Child's name _____ Child's birth date _____

Parents _____

E-mail _____

Address _____

Home phone _____

Work phone _____

Seminary student? _____

Date of enrollment request _____

Days requested _____

Other information _____