**Application Form**

Please print and complete the form below: Forms may be mailed or hand delivered to the Center, Attn: Admissions Office at the above address. A $150.00 non-refundable application fee must accompany this form. When a space becomes available, applications are sorted first by the date the application was received by the age and sex of the child. Applications are accepted year-round. Submission of the Application Form does not guarantee placement in the Center. Checks are to be payable to SAECC.

Enrollment Category: □ Fully Pay □ DC Voucher □ Tuition Assistance

Check if applicable: □ Currently enrolled □ Alumni □ Referred by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Name: Requested Start Date:

Date of Birth: Sex of Child:

Home Address:

City, State, Zip Code:

Parent’s Name:

Work Number: Cell Number:

E-mail Address:

Parent’s Name:

Work Number: Cell Number:

E-mail Address:

OFFICE USE ONLY

Received by:

Signature Title Date