



Wait List Application

Child's Name: _____

Birthdate: _____

Current Age: _____

Gender: _____ Female _____ Male

Parent(s) Name: _____

Phone(s): _____

Email: _____ (please print clearly)

Address: _____

Please indicate beginning school year preference:

_____ 2017 - 2018 My child will be _____ years old on September 1, 2017.

_____ 2018 - 2019 My child will be _____ years old on September 1, 2018.

_____ 2019 - 2020 My child will be _____ years old on September 1, 2019.

_____ 2020 - 2021 My child will be _____ years old on September 1, 2020.

How did you hear about ORNS? _____

I understand that it is my responsibility to keep on the information on the wait list up to date and will call or e-mail the school with any changes.

Parent Signature Date

-----Office Use Only-----

Date/Time Application Returned _____

Application Received By _____

\$20 Processing Fee Paid _____ Not Paid _____