



Eastminster Day School 2026-2027 Waitlist Application

This application is good until February of the next year from the date submitted. It is the family's responsibility to update the application each year to keep their status on the waitlist. All information is required. Omitting information forfeits the application.

Child's name:	Due date or birthday:
Preferred name:	Male Female
Street address:	
City, State:	Zip Code:
Mother's name:	Cell phone:
Employer:	Work phone:
Mother's email:	
Father's name:	Cell phone:
Employer:	Work phone:
Father's email:	
Covenant Family: yes no	EPC member: yes no
Siblings currently enrolled: yes no	Names of siblings:

Please check the Program(s) Desired:

____ Part Time (9am to 12pm with extended care optional; August to May)

____ Full Time (8AM-5:30PM) ____ Infant ____ Toddler ____ Twos ____ Threes ____ Fours

____ School Age If you are looking for School Age, what elementary school will your child be attending? _____

I am interested in Early Morning Care (7:30 AM- 8:00 AM) ____ Yes ____ No

I am interested in Extended Care (Part Time only from 12:00 PM to 5:30 PM) ____ Yes ____ No

Office Use Only:

Date received: _____ Time received: _____ Office staff initials: _____