

Sweet Peas Village

Pre-Registration / Wait List Form

Name: _____

Address: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ Email: _____

Child's Name: _____ D.O.B.: ____/____/____
(month) (day) (year)

Please list any known allergies: _____

Expected Start Date: _____

Requested Schedule: Full-Time _____ Part Time: _____

Days Requested: M _____ T _____ W _____ Th _____ F _____

Classroom: (please circle one) Pea Wees / Honeysuckles / Peanuts /
Sunshines / Pre-K / Kindergarten

Tour was given by: _____ Date of tour: _____

* A \$100 non-refundable registration fee is due upon enrolling your child on Sweet Peas Village's Waiting List.

* This non-refundable fee will be due annually to remain on our waiting list.

For Office use ONLY

Date Form Received _____

Date Entered in System _____ Cash/Check # _____ Amount _____

Registration Packet Sent: Date _____ Confirmed _____

Initials _____



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