



Lakeway Church Christian Preschool WAITLIST APPLICATION

Child's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Boy _____ Girl _____

Mother's Name: _____ Father's Name: _____

Mother's Email: _____

Father's Email: _____

Mother's Cell #: _____ Father's Cell #: _____

Are you a current member of The Lakeway Church? _____

Do you have children currently attending LCCP? _____

Do you have children that have attended LCCP in the past? _____

**I acknowledge that LCCP no longer accepts exemptions from immunizations for
Reasons of Conscience. Parent/Guardian Initial: _____*

**I understand that my child's wait list application is not complete until LCCP staff
have received the \$25 wait list fee (Cash or check only)
Parent/Guardian Initial: _____*

Thank you for your interest in The Lakeway Church Christian Preschool. We are very excited that you are thinking of enrolling your child in our program. There is a \$25 non-refundable fee per child to add your child's name to the LCCP waiting list. You will be contacted when a placement option is available.

We hope to welcome you into our family at Lakeway Church Christian Preschool!

FOR OFFICE USE ONLY

Date form received: _____ Check/Cash Receipt # and Amount: _____

FOR OFFICE USE ONLY				
Contact Date: _____				
Result: _____				
NR No Response	LM Left on Message	AS Another School	AC Accepted	N/W No/Stay Wait List

Please return form to:

Maegan Pratt, Director of Preschool Ministries

Lakeway Church Christian Preschool

2203 Lakeway Blvd.

Lakeway, TX 78734

512-261-6632

maegan@lakewaychurch.net

Fax: 512/261-7099