



## Greater Lowell Family YMCA Preschool Program Waitlist Application

FOR YOUTH DEVELOPMENT™  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

Today's Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Requested Start Date: \_\_\_\_\_

**Please be aware this is for a full day, five day per week Preschool Program.**

Do you require financial assistance?

No

Yes (see below)

Have a voucher

Awaiting a voucher

Have a letter about an EEC slot opening

Other \_\_\_\_\_