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Website: [www.illumichildcare.ca](http://www.illumichildcare.ca)  
Email: [info@illumichildcare.ca](mailto:info@illumichildcare.ca)  
Phone: 780-653-0271

## WAITING LIST INFORMATION FORM

To place a child's name on our waiting list, you must complete this Information Form.

Families are added to the waiting list in appropriate age groups based on a first come first served basis. However, priority is given to children who are currently enrolled and moving from one age group to another, siblings of children who are currently enrolled, and the children of staff members employed at the Centre.

Please keep in mind that movement on the waitlist is based on families withdrawing from the Centre. As families are only required to give one month's notice of withdrawal, we often have no way of knowing how quickly you will move up the waiting list. We contact families to update information if necessary and as space becomes available. Families can check the status of their place on the list; however, we cannot give any specific information on exact wait times or when space will become available. If space becomes available, we will call you, and hold a space for 24 hours, by which time a **deposit of \$150.00 will be required to secure a space for your child**. Please be advised, the \$150.00 will be kept as a credit and be refunded with a one month notice of your child's withdrawal of service or becomes non-refundable if failure to comply with a one month notice of termination of care.

Thank you for considering Illumi Child Care!

Please complete the following information and return the completed form to us. You may email at: [illumichildcare@gmail.com](mailto:illumichildcare@gmail.com)

|               |  |               |  |
|---------------|--|---------------|--|
| Mother Name:  |  | Father Name:  |  |
| Mother Phone: |  | Father Phone: |  |
| Mother Email: |  | Father Email: |  |

|                  |  |                |  |
|------------------|--|----------------|--|
| Child's Name #1: |  | Date of Birth: |  |
| Child's Name #2: |  | Date of Birth: |  |

|                     |  |               |  |
|---------------------|--|---------------|--|
| Desired Start Date: |  | Today's Date: |  |
|---------------------|--|---------------|--|

| FOR OFFICE USE ONLY |  |             |  |
|---------------------|--|-------------|--|
| Deposit Date:       |  | Deposit \$: |  |