## Greenland Recreational After School Program

## 15 Greenland Rd, Toronto ON, M3C 1N1 Phone: 416 444 7427 Email: info@greenlandrecreational.com

	Wait List Application	n Form	
Child's Name	Date of Birth:		Date Applied:
	Circle: Male or Female		MM/DD/YY
Address:		Apt/unit #	
City:	Postal Code:	_Home Phone #	
Parent 1 Name:		Parent 2 Name:	
(Guardian 1)		(Guardian 2)	
email address:		email address:	
Work Phone #		Work Phone #	
Cell phone #		Cell phone #	
My child attendsDay care and is attendingSchool at			
the current time. My c	hild will attend	when we require care a	t GRASP
My Child: Has subs	idy in place $\Box$ Is on the Subsidy	y wait list $\Box$ Will be	paying full fee 🗆
My child has a sibling	at GRASP YES □ No	Sibling name:	
Please List any allergie	es and or special needs your child r	nay have or need assistan	nce with:
•	in summer camp: YES		
5	l in school Year care only: YH		
□ I am interested	in both summer camp and	d school	
schools within the Don N	going waiting list for families that have Aills Community. Once a registration f tence according to the date of applicat	form has been filled out, you	ur child(ren)'s names will be added
<ol> <li>Siblings of</li> <li>Children w</li> </ol>	tending Greenland Public School Children currently enrolled in the pro ho live/attend school in the Greenland live in the Don Mills Community.		area. 4.People
month's fee. If the start of deposit will be refunded at zero. 2 weeks process	a spot, families will be required to pay date is not at the beginning of a given to the family once <b>30 DAYS WRITT</b> ing time for refund is required. While we cannot guarantee that a space will	n month, the first month's f EN withdrawal notice has be we will make every effort	ee will be prorated. The two-week een given and account balances are

Parent Signature :