



Chapel Hill Cooperative Preschool
108 Mt. Carmel Church Road, Chapel Hill, NC 27517
919-942-3955
enrollment@chapelhillcoop.com

To be completed by CHCP:

DATE: _____

App Fee: _____

Waitlist Application Form

Thank you for your interest in Chapel Hill Cooperative Preschool. This form is for waitlist placement only. Full enrollment paperwork will be required upon acceptance.

CHILD INFORMATION

Child's Full Name: _____ Nickname (if any): _____

Date of Birth: _____ Sex: _____ Race: _____

Child's Address: _____

City _____ State _____ Zip _____

PARENT / GUARDIAN INFORMATION

Parent/Guardian #1

Name _____

Phone _____ Email _____

Parent/Guardian #2

Name _____

Phone _____ Email _____

Child lives with: _____

ENROLLMENT PREFERENCE

Desired Start Date: ☐ ASAP ☐ Summer (mid-June) ☐ Fall (late August) ☐ Other _____

Preferred Schedule: ☐ M-F ☐ M/W/F ☐ T/TH

Preferred Day Length: ☐ $\frac{3}{4}$ Day (pick up by 3:00 PM) ☐ Full Day (pick up between 3:00–5:30 PM)

Is your schedule flexible? ☐ Yes ☐ No

I would like to be contacted should an enrollment opportunity arise that is different from my preferred schedule (e.g., $\frac{3}{4}$ day available instead of full day)? ☐ Yes ☐ No

ABOUT YOUR CHILD

Previous childcare experience (if any):

Are there any allergies or medical conditions we should be aware of?

Are there any restrictions you would wish to observe at school (religious, philosophical, or dietary)?

What do you hope our cooperative preschool can provide for your child?

Chapel Hill Cooperative Preschool is a creative, outdoor-focused, cooperative school. Children engage in messy play, mud, water activities, painting, and daily outdoor exploration in all weather. Parent participation is required.

☐ I understand this is a cooperative preschool and families are expected to volunteer.

Parent/Guardian Signature _____

Date _____

Completed forms may be returned via email to: enrollment@chapelhillcoop.com