



Radiance
Childcare Centre

613 Queens Avenue
New Westminster, BC V3M 1L1
778.686.6330 info@radiancechildcare.org

WAITLIST FORM

Start Date: _____ **End Date:** _____

Child's First & Last Name: _____ Nickname: _____

Date of Birth: _____ Gender: _____

Home Address: _____

Parent/Guardian information:

1. Full Name:	2. Full Name:
Relationship to the child:	Relationship to the child:
Address (if different from above):	Address (if different from above):
Phone:	Phone:
Email:	Email:

Why are you considering Radiance Childcare Centre?

How did you hear about our Centre?

- ☐ JKCS Family ☐ Attend Olivet Church ☐ Live in the area ☐ Website
- ☐ Church: _____ ☐ Friends: _____ ☐ Advertisement ☐ Other: _____

Parent Signature: _____

Date: _____