



**Union Day School**  
 WAITING LIST APPLICATION  
**HALF DAY PROGRAM**



7582 Woodrow Street, Irmo, SC 29063 803-781-0630  
 License Number 16,941

DATE TO START SCHOOL: \_\_\_\_\_

Date Contacted: \_\_\_\_\_

Please indicate which class you are planning to place your child. Please note that we are required to follow the South Carolina age cutoff date of September 1.

Ages 1-2 \_\_\_\_\_ Mon./Wed./Fri. \_\_\_\_\_ Tues/Thurs. \_\_\_\_\_ Mon.-Fri.

Ages 1-2 \_\_\_\_\_ Mon./Wed./Fri. \_\_\_\_\_ Tues/Thurs. \_\_\_\_\_ Mon.-Fri.

Ages 2-3 \_\_\_\_\_ Mon./Wed./Fri. \_\_\_\_\_ Tues/Thurs. \_\_\_\_\_ Mon.-Fri.

Age 3 \_\_\_\_\_ Mon./Wed./Fri. \_\_\_\_\_ Mon. -Thurs. \_\_\_\_\_ Mon.-Fri.

Age 4 \_\_\_\_\_ Mon./Wed./Fri. \_\_\_\_\_ Mon. -Thurs. \_\_\_\_\_ Mon.-Fri.

Age 5 \_\_\_\_\_ Mon.-Fri.

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent's Names: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

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

This application is valid for 1 year from today's date. This application does not guarantee a spot. Please remain in touch by email at [Helen@UnionIrmo.org](mailto:Helen@UnionIrmo.org) to let us know of your continued interest.

\_\_\_\_\_  
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Office Use Only:

Waiting List fee: \$50.00 \_\_\_\_\_ (non-refundable)

Date paid: \_\_\_\_\_

Sibling priority: \_\_\_\_\_

Check #: \_\_\_\_\_

Cash: \_\_\_\_\_