

**NOVATO YOUTH CENTER  
CHILDCARE INTEREST FORM**

**CLASSROOM:** \_\_\_\_\_

**Child's Name:** \_\_\_\_\_ **Birthdate** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Employer/School** \_\_\_\_\_ **Phone** \_\_\_\_\_

—  
**Email Address** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **HomePhone** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Employer/School** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Desired Schedule:**

**Childcare days needed:**    **Monday**\_\_\_ **Tuesday**\_\_\_ **Wednesday**\_\_\_ **Thursday**\_\_\_ **Friday**\_\_\_

**Drop off time:** \_\_\_\_\_      **Pick up time:** \_\_\_\_\_

**Name of school:** \_\_\_\_\_      **Grade:** \_\_\_\_\_

**Desired start date:** \_\_\_\_\_

**THIS INFORMATION WILL AUTOMATICALLY PLACE YOU ON OUR CHILDCARE WAIT LIST FOR ONE YEAR FROM THE DATE WE RECEIVE THIS APPLICATION.**

**NYC USE: Date received** \_\_\_\_\_      **Received by** \_\_\_\_\_

**NOTES:** \_\_\_\_\_

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