



## Online Request for Application

**Child's Name:** \_\_\_\_\_  
(please print clearly)

**Age:** \_\_\_\_\_ **Male:** \_\_Y\_\_N\_\_ **Female:** \_\_Y\_\_N\_\_ **Date of Birth:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

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

**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

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

**Is your child potty trained? Yes** \_\_\_\_\_ **No** \_\_\_\_\_ **If so how long?** \_\_\_\_\_

**Is your child in a preschool program now? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**When do you plan for your child to begin school?** \_\_\_\_\_

### **Please download and mail/email this request to:**

Great Kids Development Center

8300 Carroll Ave.

Takoma Park, MD 20912

**Contact Us: Phone:** (301) 434-1204 **Email:** [director@growinggreatkids.org](mailto:director@growinggreatkids.org)