

2024-2025 School Year Enrollment Request

Date of Application E-mail Address (write clearly):				
Parent/Guardian First and Last Name				
Name of Child				
Date of Birth				
I would like my child to attend: Overlook		Cully	Either	
5 0	days	4 days	3 days	2 days
On the following days:				
Monda	ay Tuesday	Wednesda	ay Thursday	Friday
This is my child's current school year schedule: yes no				
* Children may be picked up any time after 3:00pm.				
Please indicate and describe any flexibility you have in your schedule. Flexibility provides a greater likelihood that your enrollment request can be met.				

Please return this form as soon as possible. Current students have preference before we open spots to incoming families. Thank you!