



3909 Forest Drive
Columbia, SC 29204

803-787-4148

www.gslc.com/day-school

gsdsdir@gslc.com

Good Shepherd Day School *Application for Waiting List*

Child's Name: _____ Today's Date: _____

Desired Enrollment Date: _____

Birthday or Due Date: _____

Mother's Name: _____

Mother's Work #: _____

Mother's Cell #: _____

Father's Name: _____

Father's Work #: _____

Father's Cell #: _____

Mailing Address: _____

Home Phone #: _____

Currently Enrolled Siblings: _____

Church Member: _____

\$25 application fee: Date Received: _____ Check Number _____ Cash _____

This is just a waiting list application and does not guarantee a spot at the Day School. You will be notified when there is an opening for your child. This application is valid for two years from today's date.

An annual registration of \$125 will be collected at time of enrollment.

Priority is given to Church Members and siblings of enrolled students.

Office Use Only

Follow up: _____