FLAGSTONE SCHOOL

721 N. Columbus Street

Alexandria, VA 22314

(703) 683-7114

Flagstone School Wait List Form

Application Date: _____ **Desired Enrollment Date:** _____

Child's Name:_____

DOB: _____ **or expected due date**: _____

Home Address:_____

City:_____ **State**: _____ **Zip**: _____

Home #: _____ **Cell #:** _____ **Work#:** _____

Parent's Name: _____

Home Address:_____

City:_____ **State**: _____ **Zip**: _____

Home #: _____ **Cell #:** _____ **Work#:** _____

Email address: _____

Parent's Name: _____

Home Address:_____

City:_____ **State**: _____ **Zip**: _____

Home #: _____ **Cell #:** _____ **Work#:** _____

Email address: _____

Wait list fee $100:00
Please fill out, print and submit to the office along with a $100 cheque.