

**DIAMOND BAR COMMUNITY PRESCHOOL**  
**SIBLING NURSERY CONFIRMATION**

To: Scheduling Chairperson

From: \_\_\_\_\_

I intend to use the sibling nursery on my scheduled work days. My preschool child,  
\_\_\_\_\_, is enrolled in the 2-day/3-day/5-day program. My child(ren) who will  
be in the sibling nursery is/are listed below:

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_