

MONTESSORI LEARNING FOR LIVING PRESCHOOL & KINDERGARTEN
 16900 DEWITT AVE/P.O. BOX 1594, MORGAN HILL CA. 95038 779-6488
 www.montessorimorganhill.com

"HOUSE" (3 1/2-6 yrs.)

REGISTRATION FORM

Year: 2017-2018

Child's Information

Child's Full Name _____
 Name you would like used at school _____
 Birthdate _____ Age _____ M _____ F _____
 Home Address _____
 City _____ Zip Code _____ Home# _____
 Mailing Address (if different) _____
 Previous Schools Attended _____

List names and ages of brothers and sisters:

Name _____ Age _____ Name _____ Age _____
 Name _____ Age _____ Name _____ Age _____

Parent Information

Mother's Name _____ Cell# _____
 Email _____ Work# _____
 Occupation _____ Employer _____
 Address (if different) _____ City _____
 Father's Name _____ Cell# _____
 Email _____ Work# _____
 Occupation _____ Employer _____
 Address (if different) _____ City _____

SCHEDULE DESIRED (circle days and times)

Half-Day Session 9:00-1:00		Full-Day Session 9:00-3:30	
3 Days: MTW	\$475	3 Days: MTW	\$580
3 Days: WThF	\$475	3 Days: WThF	\$580
4 Days: MTThF	\$550	4 Days: MTThF	\$655
5 Days:	\$625	5 Days:	\$735
		Tuition Amount (per month)	\$ _____

Extended hours needed? If yes, list times: _____ Nap? Y or N (extended hrs. amt.) \$ _____

Total Monthly Tuition: \$ _____

Parent/Legal Guardian Signature _____ Date: _____