

# San Marin Montessori



**Child's name** \_\_\_\_\_

Nickname \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

## **Child Lives with:**

Both parents \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_

### Siblings:

Name \_\_\_\_\_ age \_\_\_\_\_ Name \_\_\_\_\_ age \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_ Name \_\_\_\_\_ age \_\_\_\_\_

## **Previous experience away parents/home:** (check one or write explanation)

Nanny \_\_\_\_\_ Babysitter \_\_\_\_\_ Daycare \_\_\_\_\_

**Father's Name** \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Home phone \_\_\_\_\_ Cell \_\_\_\_\_

e-mail \_\_\_\_\_

**Mother's Name** \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Home phone \_\_\_\_\_ cell phone \_\_\_\_\_

e-mail \_\_\_\_\_

**Please choose from;**

3 days per week \$980.00, \_\_\_\_\_

4 days per week, \$ 1,100.00 Monday, Tuesday Wednesday, Thursday.

Monday through Thursday from 8:45 A.M through 1:00 P.M

**Beginning** \_\_\_\_\_  
**Month/Year**

I have enclosed the \$40.00 application fee. (non-refundable, applicable into Enrollment fee)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Notes**

- \$\$320 Enrollment fee is due at the time of acceptance to the program.
- Tuition is due on the 1st of the month preceding enrollment date.
- Receipt of this application puts your child on our waiting list.

**License # 214200208**