

Office use only

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

Amount Received: \$ \_\_\_\_\_

Staff initials: \_\_\_\_\_

# SCHOOL AGE 6 – 12 YEARS



Alfred Montessori School

## Alfred Montessori School 2017 Summer Program Enrollment Registration Deadline: June 16th

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_

Primary Phone \_\_\_\_\_ Additional Phone \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

*Please make sure your child's Blue Card contains updated emergency contact information*

Half Day (8am- 12pm)

Full Day (8am- 5pm)

Weekly Rate \$125.

\$20 per Half day

\$30 per Full day

ALL 5 days (Mon. – Fri.)

**PLEASE ✓ TO INDICATE THE DAYS YOUR CHILD WILL ATTEND:**

- |                                                                   |                                 |                                  |                                    |                                              |                                 |
|-------------------------------------------------------------------|---------------------------------|----------------------------------|------------------------------------|----------------------------------------------|---------------------------------|
| <b>Week 1</b> – July 10 <sup>th</sup> – July 14 <sup>th</sup>     | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 2</b> - July 17 <sup>th</sup> - July 21 <sup>st</sup>     | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 3</b> - July 24 <sup>th</sup> - July 28 <sup>th</sup>     | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 4</b> – July 31st-August 4 <sup>th</sup>                  | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 5</b> - August 7 <sup>th</sup> -August 11 <sup>th</sup>   | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 6</b> - August 14 <sup>th</sup> - August 18 <sup>th</sup> | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 7</b> - August 21st- August 25 <sup>th</sup>              | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday            | <input type="checkbox"/> Friday |
| <b>Week 8</b> – August 28 <sup>th</sup> – August 31 <sup>st</sup> | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input checked="" type="checkbox"/> Thursday |                                 |

\* School is CLOSED 9/1 & 9/05 for classroom prep.

\* 2017-2018 school year begins 9/6/17

<b>Registration Fees: (Non Refundable)</b>	(Due at registration) \$25 one child, \$45 two children, and \$65 three or more children.
<b>Billing:</b>	Invoices will be billed at the beginning of the months for July and August. Payments will be due by the 15 <sup>th</sup> of the month. Late pick up fee is \$10 for every 15 minutes past the designated time.
<b>Multiple Children Discount:</b>	If you enroll two children; each child will receive \$10 off per week. Enroll three children; each child will receive \$15 off per week. This is only for a <b>full time/ 5 day</b> schedule.
<b>Schedule Change:</b>	Each time registration changes a \$10 charge will apply. This applies to adding or dropping a day.
<b>Social Security Number(s):</b>	Since summer billing is done monthly, social security numbers are required.

	Father's SSN _____	Mother's SSN _____
--	--------------------	-----------------------

**By signing below I acknowledge the conditions of this registration and the fees associated with enrollment in the AMS Summer Program. I also understand that this form, once submitted with payment of a registration fee, my child will then be enrolled in the program. I agree to pay the specified tuition for the weeks of programming I have indicated above. If I withdraw my child from the program I will still be responsible to pay 50% of the remaining tuition.**

**Parent/Guardian Signature \_\_\_\_\_**

date \_\_\_\_\_