

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

**Gender:**     **Boy**         **Girl**                      **Desired Enrollment Date** \_\_\_\_\_

**Child's Physical Address** \_\_\_\_\_

**Child's Home Phone** \_\_\_\_\_

**Parent/Legal Guardian Name** \_\_\_\_\_ **Relationship to Child** \_\_\_\_\_

**Mailing Address**         *same as child* \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_ **Mobile Phone** \_\_\_\_\_

**Email Address\*** \_\_\_\_\_ **Mobile Carrier\*** \_\_\_\_\_

*\*Please note that most routine school communication is provided by email. Mobile carrier is requested for the exclusive purpose of adding your family to the emergency text alert system in the event of an unforeseen emergency.*

**Parent/Legal Guardian Name** \_\_\_\_\_ **Relationship to Child** \_\_\_\_\_

**Mailing Address**         *same as child* \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_ **Mobile Phone** \_\_\_\_\_

**Email Address\*** \_\_\_\_\_ **Mobile Carrier\*** \_\_\_\_\_

*\*Please note that most routine school communication is provided by email. Mobile carrier is requested for the exclusive purpose of adding your family to the emergency text alert system in the event of an unforeseen emergency.*

**Please indicate the program(s) which you are interested in for this child:**

- Infant (6 weeks-24 months)
- Pre-Primary (18-36 months)
- Primary (2 ½-5 years)
- Kindergarten (5-6 years)
- Half Day (8:30a-12:30p)
- Core Day (8:30a-3:00p)
- Extended Day (7:00a-6:00p)

If space is currently available on your desired enrollment date in the program you request, submission of this application requires payment of a one-time non-refundable \$100 Registration Fee, annual Materials Fee, and signed Enrollment Agreement. If space is not currently available, or if a future desired enrollment date is specified, your child may be placed on a prospective list for enrollment. If a space becomes available and your child is determined to be a good fit, a space will be offered to your family by email, and your child's enrollment can be confirmed only upon receipt of the Enrollment Agreement and annual Materials Fee.

I understand the above and have completed this form as accurately as possible. By signing below, I am acknowledging my agreement to the terms herein and indicate my intent to enroll my child in The Growing Place Montessori pending availability.

**Parent signature** \_\_\_\_\_ **Date** \_\_\_\_\_