

MONTESSORI CHILDREN'S HOUSE OF LOUDOUN

NEW STUDENT APPLICATION FORM 2008 - 2009

Please print or type

CHILD'S NAME: _____
Last First Middle Nickname

BIRTHDATE: _____ AGE: _____ SEX: _____

HOME ADDRESS: _____
Street City Zip Code

HOME TELEPHONE: _____ CELL: _____

Please check appropriate program:

Toddler (18 mos. – 3 years) _____ 8:45 – 11:45
Extended Day Toddler _____ 8:45 – 2:45 _____ 8:45 – 4:00
_____ 8:45 – 5:00 _____ 8:45 – 6:00

Early Childhood* (3 – 5 years, not kindergarten) _____ 8:45 – 11:45 or _____ 11:45 – 2:45
Extended Day Early Childhood _____ 8:45 – 2:45 _____ 8:45 – 4:00
_____ 8:45 – 5:00 _____ 8:45 – 6:00

Full Day Kindergarten (5 by Sept. 30, 2008) _____ 8:45 – 2:45
Extended Day Kindergarten _____ 8:45 – 4:00 _____ 8:45 – 5:00 _____ 8:45 – 6:00

Early Morning Care (all students) _____ 7:30 – 8:45

** All children enrolled in an Early Childhood class MUST be fully potty trained.*

CONTRACT CHOICE: _____ 10-Installments (8/28/08 – 6/11/09) or _____ Year round 12-Installments (6/16/08 – 6/11/09)

PREVIOUS CHILD CARE:

Name of provider (individual or facility) _____

Address and phone number _____

Beginning and end dates of care _____

(MCHL reserves the right to contact the most recent day care provider)

FATHER'S NAME: _____

BUSINESS TELEPHONE: _____ EMAIL: _____

MOTHER'S NAME: _____

BUSINESS TELEPHONE: _____ EMAIL: _____

A non-refundable application fee of \$ 50.00 must accompany this form. There is only one application fee required per family. When an opening is available and a contract is written, the annual enrollment fee of \$150.00 per child is required. Please make checks payable to Montessori Children's House of Loudoun.

Montessori Children's House of Loudoun admits students of any race, color, creed and national or ethnic origin.

Parent's Signature

Date