



NEW STUDENT APPLICATION 2025 – 2026

CHILD'S NAME: _____ DATE OF BIRTH: _____

SEX: _____ Male _____ Female DESIRED START DATE: _____

HOME ADDRESS: _____

Street

City

Zip Code

Please check appropriate program:

My child is a napper: _____ Yes _____ No

For part-time enrollment please circle days required (minimum of 3 days): M T W T F

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

Infant & Toddler Program _____ 8:30 – 12:00
_____ 8:30 – 3:00
_____ 8:30 – 4:00
_____ 8:30 – 5:00
_____ 8:30 – 6:00

Early Childhood Program _____ 8:30 – 12:00
(3 – 5 years old, not kindergarten) _____ 8:30 – 3:00
_____ 8:30 – 4:00
_____ 8:30 – 5:00
_____ 8:30 – 6:00

Kindergarten Program _____ 8:30 – 3:00
(5 years old by Sept. 30, 2025) _____ 8:30 – 4:00
_____ 8:30 – 5:00
_____ 8:30 – 6:00

Please Continue on Reverse

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)

PARENT INFORMATION:

NAME: _____

NAME: _____

CELL PHONE: _____

CELL PHONE: _____

EMAIL: _____

EMAIL: _____

ENROLLMENT:

An Enrollment Contract will be created once your application is submitted. The 10-installment payment plan covers the school year from August 25, 2025 to June 11, 2026.

If you choose to enroll your child in MCHL's Summer Program, tuition will be based on your selected weeks. Summer tuition will be split into two equal payments, due on July 1, 2025, and August 1, 2025.

A non-refundable application fee of \$100 must be submitted with this form. Once the contract is issued, an **annual enrollment fee of \$250** is required.

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

Parent's Signature

Date

FOR OFFICE USE ONLY

AMT REC'D _____

CK # _____

DATE REC'D _____