

ALL STARS MONTESSORI – REGISTRATION FORM:

If you decide that All Stars Montessori is the right fit for your family, this registration form will kick-start the enrollment process. Please complete this form and return along with the non-refundable registration fee (\$100 for toddlers, preschoolers and school agers; and, \$125 for infants*) and the non-refundable deposit in the amount of one week’s tuition. The deposit of one week’s tuition will be applied to your child’s last week in attendance if two week’s notice is given. Once registration is complete, and as your child’s start date approaches, All Stars Montessori will provide you with an Enrollment Packet that will include other necessary documentation. (*For each infant registration, All Stars will provide pre-printed labels with your child’s name for their bottles and pacifiers.)

Date of registration: _____ Anticipated start date: _____

Student Name: _____ Date of Birth: _____ Age: _____ Sex: M F

Address: _____ Home number: _____

Mother’s Name: _____ Home number: _____

Mother’s Email: _____ Address (if different than above): _____

Employed at: _____ Work number: _____ Cell number: _____

Father’s Name: _____ Home number: _____

Father’s Email: _____ Address (if different than above): _____

Employed at: _____ Work number: _____ Cell number: _____

Hours child will be in attendance at All Stars Montessori:

Mon - _____ to _____, Tue - _____ to _____, Wed- _____ to _____, Thu - _____ to _____, Fri- _____ to _____

Check here if child is enrolling in All Stars Montessori’s morning or extended morning preschool program. This program operates on the same calendar as the District 196 elementary schools and will not be in operation on days when they are closed. You will be issued credits for any of these days that fall on one of your child’s regularly scheduled attendance days. **These days are above and beyond regularly scheduled holidays that All Stars Montessori is closed for. Regularly scheduled holidays are paid and no credit will be issued.**

Weekly tuition based on scheduled hours: \$ _____

Heard of All Stars Montessori through: Friend _____ Website _____ Phone book _____ Driving by _____ Other _____

Parent’s signature: _____ Medical and/or behavioral concerns you would like us to be aware of _____

Other enrollment notes:

 Date enrollment pkt provided: _____
 FOR INFANTS: Date labels ordered _____

Registration fee \$ _____ :
Paid _____ Date _____
Check # _____

Last week’s deposit \$ _____ :
Paid _____ Date _____
Check # _____