**EARLY CHILDHOOD**

 2024-2025 Enrollment Application

**Application Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Desired Start Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Returning Student** Yes or No

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_M/F\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 first/middle/last month/day/year

 Ethnicity\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Primary Language\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email for Family\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Emergency contact during school\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Father’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell/Pager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 first/last

 Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Father’s Occupation/Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Employer Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mother’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mother’s Occupation/Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Employer Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please check one: Married\_\_\_\_\_\_\_\_\_Divorced\_\_\_\_\_\_\_\_Seperated\_\_\_\_\_\_\_Other\_\_\_\_\_\_\_

 Has your child attended school before? When and where?

 Has your child received any “outside therapies” i.e. speech, OT, PT? When and where?

Where did you hear about Amy Montessori\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I would be interested in Summer Programs at Amy Montessori School.
* I give AMS permission to use my child’s image for promotional materials.
* I give AMS permission to publish parents’ and childs contact information in the school directory.

 **16945 W. North Avenue Brookfield, WI 53005 / 262-784-8817 /** [**www.amymontessori.com**](http://www.amymontessori.com)

**Minimum of three mornings attendance** Please circle first choice of days and times

 **Mornings** 9:00 a.m. to 12:00 p.m. **MON TUES WED THUR FRI**

 **Extended Day** 9:00 a.m. to 3:30 p.m. **MON TUES WED THUR FRI**

| **3 HALF DAYS $434.00/$217.00** |  **3 FULL DAYS $774.00/$387.00** |
| --- | --- |
|  **4 HALF DAYS $560.00/$280.00** |  **4 FULL DAYS $993.00/$497.00** |
|  **5 HALF DAYS $667.00/334.00** |  **5 FULL DAYS $1174.00/$587.00** |

Please check if interested in:

|  **3 HALF DAYS** |  **4 HALF DAYS** |  **5 HALF DAYS** |
| --- | --- | --- |
| ***w/1 full* $560.00/$280.00** | ***w/1 full* $694.00/$347.00** | ***w/1 full* $781.00/$391.00** |
| ***w/2 full* $668.00/$334.00** | ***w/2 full* $790.00/$395.00** | ***w/2 full* $889.00/$445.00** |
| ***w/3 full* $774.00/$387.00** | ***w/3 full* $889.00/$445.00** | ***w/3 full* $995.00/$498.00** |
|  **\_** | ***w/4 full* $993.00/$497.00** | ***w/4 full* $1104.00/$552.00** |
|  **\_** |  **\_** | ***w/5 full* $1174.00/$587.00** |

* **Before Care:** 7:30 a.m. to 9:15 a.m./available M-F for $5.00 per half hour.
* **After Care:** 3:30 p.m. to 5:30 p.m./available M-F for $5.00 per half hour.

**We hereby apply to Amy Montessori School for the program(s) stated on this application for the 2024-2025 entire school year or for the beginning date of \_\_\_\_/\_\_\_\_/\_\_\_\_.**

**For current students re-enrolling for the following school year, an enrollment fee of $100.00 along with a ½ months tuition is due with the application. The remaining balance is due at Welcome Day. If you are submitting an application for the current school year, the enrollment fee is $100, along with the full 1st month of tuition. To hold a spot for future months, that fee will be reviewed by the office administration. I understand that this payment is non-refundable. Tuition fees are expected by the first of each month via check or cash. Credit card payments are accepted with a 3% service fee. A $15 late fee will be applied if you are more than 5 days past due. Tuition prices are subject to change.**

**We have read the Enrollment and Payment policies (attached) and understand and agree to the terms.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Signature of Mother/Parent/Guardian Date***

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Signature of Father/Parent/Guardian Date***

**Please drop off or send completed form and application fee to:**

**Amy Montessori**

**16945 W. North Avenue**

**Brookfield, WI 53005**

**Amy Montessori School does not discriminate against students of any race, gender, color, nationality or ethnic origin to the rights, privileges, programs and activities available at our school.**