SAN TAN MONTESSORI PRIVATE PRESCHOOL
2022-23 STUDENT APPLICATION

San Tan Montessori does not discriminate regarding color, race, religion, national and ethnic origin, special needs, or language proficiency of students regarding policies, admission and school-administered programs.

Infinite Campus Application #: _____

Program *Toddler must be eating independently and walking stably **Primary must be potty trained   **Daily Schedule**
□ Toddler* (1 yr – 3 yr)   □ Primary** (3 yr – 6 yr)   □ Half Day   □ Full Day

Student Last Name:_____ First Name:_____ Name Used: _____

Mother/Guardian _____Email_____Phone_____

Father/Guardian _____Email_____Phone_____

Student primarily lives with □ Both Parents □ Mother □ Father □ Stepmother □ Stepfather □ Other_____

Are you living in temporary housing? Yes_____   No_____   If so, is this due to hardship? Yes_____   No_____

□   If you are splitting tuition payments with a second person, check here to have billing contact you.

The following individual(s) may NOT remove my child from the facility.
□ None   _____   _____   _____
        Custody/Legal papers must be provided and on file at the school.

I, the parent/guardian of_____, agree to **(please read and check each):**

General:
□ Provide a lunch daily for my child, if enrolled in Full Day program or Lunch program.
□ Provide transportation to and from school every day.
□ Provide prompt and timely drop-off and pick-up of my child daily. If my student is not picked up at 3:30pm dismissal they will be signed into the after care program and usage charges will incur. See Before and After Care Program for Details.
□ Provide student pick-up within 30 minutes of illness or severe behavior notification.

Photo Release: I give my permission to have photographs of my child in
□ Internal: May include the school yearbook, private Facebook pages, newsletters.
□ External: Print/online media viewable by the general public.

Payments:
□ I agree to pay the non-refundable $250 Registration Fee.   □ Pay Online   □ Pay in Person
□ I agree to pay the $250 Program Activity Fee.   □ Pay Online   □ Pay in Person

_____   _____   _____
Mother/Guardian Signature   Father/Guardian Signature   Date

For Office Use Only: □ Registrar □ Email □ Roster   □ Reg. Fee   □ Activity Fee □ 1st Month Tuition

Date received:_____   Notes:_____   Siblings:_____

Date paid:_____   Payment received by:_____   □ Online □ Cash □ CC □ Check # _____

Program: Toddler   Primary   3D 4D 5D HD FD   LP   Teacher:_____Start Date: _____