SAN TAN MONTESSORI PRIVATE PRESCHOOL

2023-24 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, admissions and school-administered programs.

Infinite Campus Application #: _____

Program: *Toddler must be eating independently and walking stably **Primary must be potty trained

☐ Toddler* (1 yr – 2 yr) ☐ Primary** (2 yr – 6 yr)

Daily Schedule

☐ 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:

☐ I provide a lunch daily for my child, if enrolled in Full Day program or Lunch program.

☐ I provide transportation to and from school every day.

☐ I 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.

☐ I 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 $300 Program Activity Fee. ☐ Pay Online ☐ Pay in Person

_____ _____ _____

Mother/Guardian Signature Father/Guardian Signature Date

For Office Use Only: ☐ Register ☐ Email ☐ Roster ☐ Reg. Fee ☐ Activity Fee ☐ 1st Month Tuition

Date received: _____ Review: _____ Siblings: _____

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

Program: Toddler Primary M T W TH F AP Teacher: _____ Start Date: _____