## **Montessori Nursery**

## **Registration Form**

Child's Name		
Date of Birth		
Parent(s) Name(s)		
Stress Address		City, zip code
Cell Phone (Parent 1, Paren	t 2)	
E-mail (Parent 1, Parent 2)		
Program (*Please be aware	that prices are su	ubject to change)
Full Montessori Day	8:30-3:30	\$1200/mo
Add-On Options		
Early Drop off	7:30-8:30	\$175/mo
Extended day	3:30-4:30	\$175/mo
Late Day	3:30-5:30	\$350/mo
Starting Date		
August year		
June year		
	\$100.00 non-refund	es of Montessori Nursery and wish to register my child for lable registration fee will be done through Brightwheel and this
Signature of Parent		Date