Alfred Montessori School

2021 Summer Program Enrollment

Infant/Waddler

Registration Deadline: Monday, May 17th

# Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_

# Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Primary Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Additional Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Parent’s/Guardian’s Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Full Day: 8:30am-4:30pm**

**🞏 $1000 per session OR 🞏$275 per week**

**Please put a check mark on the weeks your child will attend below.**

|  |  |  |
| --- | --- | --- |
| **Session** | **Week #/dates** | **Will Attend** |
| Session #1 | Week #1-July 6-9 (starts on Tuesday) |  |
|  | Week #2-July 12-16 |  |
|  | Week #3-July 19-23 |  |
|  | Week #4-July 26-30 |  |
|  |  |  |
| Session #2 | Week #5-August 9-13 |  |
|  | Week #6-August 16-20 |  |
|  | Week #7-August 23-27 |  |
|  | Week #8-August 30-Sept 3 |  |

**\*2021-2022 school year begins Thursday, September 9th\***

|  |  |
| --- | --- |
| **Registration Fee:** | $25 one child, $45 two or more children; fee due with registration form and non-refundable. |
| **Billing:** | Invoices will be given to families on the first day of each session. Payments will be due 10 days after statement date. |

**By signing below, I acknowledge the conditions of this registration and the fees associated with enrollment in the AMS Summer Program. I agree to pay the specified tuition for the weeks of programming I have indicated above. If I withdraw my child from the program after it begins, I will still be responsible to pay 50% of the remaining tuition.**

**Parent/Guardian Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_