MONTESSORI COUNTRY SCHOOL

P.O. Box 272, Herndon, VA 20172-0272, 703-437-8285



APPLICATION FOR ENROLLMENT – MOMMY & ME 2019-2020

Child's Full Name					Nickname		Birth Date		M/F
Street Address					Cit	у	State	Zip	_
PROGRAMS:									
MOMMY & ME (At least 15 months)									
Choose date	Sessio	on 1 8 week			Tues 10:0	to 11:30, September 10 th			
	Sessio	n 2]	8 weeks	Tues 10:0	to 11:30, November 12th			
	Sessio	n 3		8 weeks	Tues 10:0	to 11:30, January 28th			
	Sessio	n 4		8 weeks	Tues 10:0	to 11:30, April 14th			
Proof of legal cu	istody i	s required if:	G	Guardians li	sted below a	e not the parents OR	If <u>both</u> parents	are NOT listed	
Mother/Guardian	n _					Father/Guardian			
Cell Phone	_					Cell Phone			
Alt Phone						Alt Phone			
Email						Email			
Employer /Company						Employer /Company			
Work Address						Work Address			
Home Address (if different than above)									
Language(s) spoken at home Are there Specific Custody/Visitation Arrangements Yes / No									
Refer to the TUITION AND FEES POLICIES sheet for detailed fees and policies.									
NEW STUDENTS: I understand a NON-REFUNDABLE, one time Application Fee of \$75.00 is due with this application along with the NON-REFUNDABLE TUITION of \$150.00 for the session.									
NON-REFUNDABLE TUITION: I understand that if offered enrollment, the cost of the 8week Mommy & Me program is NON-REFUNDABLE. Failure to make timely payment can result in the loss of the offered space.									
PHOTO RELEASE: Taking photos of the children during various activities throughout the session and sharing them through posts on our MCS website or in an emailed newsletter through Constant Contact are part of our program. Please check one:									
☐ YES or ☐ NO I AGREE to mine & my child's photos to be posted to the PARENT PROTECTED section of the MCS website or Constant Contact emailed newsletter									
☐ YES or ☐ NO I AGREE to mine & my child's photos to be posted to the PUBLIC section of the MCS website, Constant Contact emailed newsletter or the MCS Facebook page									
I have read and agree to the above terms regarding enrollment at Montessori Country School (MCS). I/We recognize the risks inherent to participation in recreational activities and agree to hold harmless Montessori Country School, its officers and employees/volunteers from any and all claims from bodily injury and/or property damage, which result from my child's participation in all activities sponsored by Montessori Country School.									
Parent/Guardian S	Signatur	e		<u> </u>	arent/Guardia	n Name		Date	
	-								
Date received Amount paid: \$ Ck # Start Date EZCare									