

Midland Montessori School

2019 - 2020

ENROLLMENT APPLICATION

Registration Fees: \$175 for all programs

All registration fees are non-refundable
Sorry, No Exceptions

Please print clearly:

Child's Name: _____ Date of Birth: _____
(Circle one Program age) School Year
____Male ____Female Program age: Infant/Toddler Toddler 3-6 All Year

Program time: Class Day Half Day School Day All Day

Home Address: _____ Zip: _____

Home Phone: _____

Father's Name: _____ E-Mail Address: _____

Home Address (if different): _____

Work Phone: _____ Cell Phone: _____

Occupation: _____ Place of Employment: _____

Mother's Name: _____ E-Mail Address: _____

Home Address (if different): _____

Work Phone: _____ Cell Phone: _____

Occupation: _____ Place of Employment: _____

Please check one or both boxes above for your preferred email address for MMS use.
MMS utilizes email through the office and classrooms for family correspondence. ✓

How did you hear about MMS: _____ Referred By: _____

For Office use only

Date of application: ____/____/____

Planned start date at MMS: ____/____/____ OR New School Year

Date registration folder/paperwork was given for student ____/____/____

Registration fee/payment information:

Cash \$ _____ Check \$ _____ # _____ Credit Card \$ _____

Classroom assignment (if known at time of enrollment): _____

Other registration information: _____.

Re-enrollee

Sibling of current enrollee

New to MMS