

INTERNATIONAL MONTESSORI ACADEMY

Enrollment Application

Please admit for enrollment:

Child _____ Sex _____ Age _____ Birthdate _____

Child _____ Sex _____ Age _____ Birthdate _____

Father _____

Mother _____

Address _____

Address _____

Employer _____

Employer _____

Phone W _____ Cell _____

Phone W _____ Cell _____

Email _____

Email _____

Previous Montessori Schooling? _____

If yes, where? _____

Previous Preschool/Daycare? _____

If yes, where? _____

What school year are you applying for? _____

Application and Enrollment Fees

There is a non-refundable \$100 application fee per child due with this form. If not paying online, please make checks out to **International Montessori Academy**.

Upon enrollment there will be a one-time, non-refundable \$450 registration fee. The non-refundable re-enrollment fee at the initiation of each subsequent year will be \$250.

Enrolling parent must sign the following legal release for this application to be considered:

I hereby give my permission for my child to participate in all school activities, including field trips and other activities on and off the school premises. I understand that some of these activities, as well as travel that might be involved, imply an inherent risk of injury and on behalf of myself and my child I release the school, its agents and employees and wave any claim I or my child and/or our heirs, executors, administrators and assignees may have against them for any injury or disability incurred, either at school or during any off-campus activity except for claims arising from the active misconduct or gross neglect of school personnel.

Date _____ Parent's Signature _____