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|--------------------------------------|---------------------------------------|
| APPLICATION DATE: Day / Month / Year | SCHOOL START DATE: Day / Month / Year |
| | DISCHARGE DATE: Day / Month / Year |

CHILD'S NAME

| | | | |
|------------|-----|-----------|-------------------------------|
| First Name | M.I | Last Name | Date of Birth: Month/Day/Year |
| | | | |

| | | |
|--------------------------|------|-------------|
| Full Address: Street No. | City | Postal Code |
| | | |

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|---|--|--|
| Application for: | Half Day Program | Full Day Program |
| Morning 9:00am to 12:00pm | <input type="checkbox"/> | 9:00am – 3:00pm <input type="checkbox"/> |
| Afternoon 1:00pm to 4:00pm – Preschool/KG (3yr-6yr) Only | <input type="checkbox"/> | |
| Before School 7:00am to 9:00am | <input type="checkbox"/> | After School 3:00pm to 6:00pm <input type="checkbox"/> |
| Please select days | Please select appropriate program: <input type="checkbox"/> Preschool/KG (3yr-6yr) 3, 4 or 5 day option only* | |
| Days: M T W TH F | 2-days 3-days 4-days 5-days <input type="checkbox"/> Prep (2yr to 3yr) | |

PROGRAM SCHEDULE INFORMATION

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| <input type="checkbox"/> Option-A: 2 Half-Day Program – Option not applicable for Preschool/KG* <input type="checkbox"/> Option-B: 3 Half-Day Program <input type="checkbox"/> Option-C: 4 Half-Day Program <input type="checkbox"/> Option-D: 5 Half-Day Program <input type="checkbox"/> Option-D2: 2 Full-Day Program – Option not applicable for Preschool/KG* <input type="checkbox"/> Option-E: 3 Full-Day Program <input type="checkbox"/> Option-F: 4 Full-Day Program <input type="checkbox"/> Option-G: 5 Full-Day Program <input type="checkbox"/> Option-H: Option-G + Extended Childcare (7am – 6pm) |
| Child Care for Options A-G = \$11/hour |

AFTERNOON PRESCHOOL/KG PROGRAM

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| <input type="checkbox"/> Option AF-B: 3 Day Program (1:00pm – 4:00pm) <input type="checkbox"/> Option AF-C: 4 Day Program (1:00pm – 4:00pm) <input type="checkbox"/> Option AF-D: 5 Day Program (1:00pm – 4:00pm) |
| CHILD CARE OPTION: (\$11/hour) |
| <input type="checkbox"/> 12:00pm – 1:00pm <input type="checkbox"/> 4:00pm – 6:00pm |



Application for Enrollment

PARENTS / GUARDIAN INFORMATION

| | |
|--------------|------------|
| Fathers Name | Occupation |
| Home Address | Email |
| | Cell Phone |
| Home Phone | Work Phone |

| | |
|---------------|------------|
| Mother's Name | Occupation |
| Home Address | Email |
| | Cell Phone |
| Home Phone | Work Phone |

EMERGENCY CONTACT PERSON – 1

| | |
|-----------|-----------------|
| Name | Relationship |
| Res Phone | Work/Cell Phone |

EMERGENCY CONTACT PERSON – 2

| | |
|-----------|-----------------|
| Name | Relationship |
| Res Phone | Work/Cell Phone |

AUTHORIZED PICK UP PERSON(S)

| | |
|-----------|-----------------|
| Name | Relationship |
| Res Phone | Work/Cell Phone |

AUTHORIZED PICK UP PERSON(S)

| | |
|-----------|-----------------|
| Name | Relationship |
| Res Phone | Work/Cell Phone |



Blackhawk Montessori
Lifelong learning...

Application for Enrollment

IMPORTANT NOTE

- 1. Children will not be released to anyone not listed in the enrollment form/emergency card unless advised by the parent.**
- 2. A registration fee of \$100.00 is required with this application. This fee is not refundable.**
- 3. The monthly fee is due regardless of the days in a month, absenteeism due to illness or inclement weather, plus school and statutory holidays.**
- 4. If for any reason it becomes necessary to withdraw your child, a minimum notice of one month is required.**
- 5. Please fill out the enrolment and other enclosed forms carefully and return these to the Director of Blackhawk Montessori.**

Parents' Signature

Date:

All Personal Information provided to Blackhawk Montessori will be treated in accordance with the terms of the school Privacy Policy. By affixing your signature above, you agree that you have read the Parents hand book including the school privacy policy carefully and that you have agreed to all the school policies and procedures as described in the Parent's handbook.