



Private Pre-school & Public K-8 Charter School in Paradise Valley

Montessori Academy Inc ◊ 6050 N Invergordon Rd ◊ Paradise Valley, AZ 85253 ◊ Voice 480-945-1121 ◊ Fax 480-874-2928

2017-2018 Enrollment Application for Full-Day Kindergarten Enrichment Program and/or Extended Day Program

STUDENT INFORMATION

Student Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I am applying for the Kindergarten Enrichment Program

\_\_\_\_\_ Kindergarten Enrichment Program 11:30am-3:00pm (charter days only) \$400/month

I am applying for the following Extended Day Programs:

\_\_\_\_\_ Morning Only/All Levels 7:00am-8:30am \$150/month
\_\_\_\_\_ Kindergarten All Day 7:00am-8:30am, 3:00pm-5:30pm \$450/month
\_\_\_\_\_ Elementary All Day 7:00am-8:30am, 3:00pm-5:30pm \$450/month
\_\_\_\_\_ Middle School All Day 7:00am-8:30am, 3:30pm-5:30pm \$450/month
\_\_\_\_\_ After School Only/All Levels 3:00pm-5:30pm \$400/month

If you enroll in an Extended Day Program ("All Day"), these programs provide care on certain days (marked TBC on your calendar) when the charter program is closed or has an Early Release day. If you require additional hours on a charter-closed day outside the TBC hours you have chosen, a rate of \$3/hr will be charged

The Extended Day Programs require a \$100.00 non-refundable registration fee, which must be received along with this contract. Montessori Academy is under no obligation to hold or reserve a place for any student until all applicable fees and the necessary paperwork has been received and accepted by school administration.

Tuition for these programs is paid in advance and is due on the 1st of each month. A \$35.00 Late Fee will be applied each time tuition is not paid by the 5th of each month.

I would like to pay the Monthly Extended Day Program Tuition in the following manner:

\_\_\_\_\_ Pre-Paid Full-Year Tuition with a 5% Discount
\_\_\_\_\_ Auto Pay/Set-up due at time of enrollment through the Front Office (Monthly on 1st of every month)

If you should decide to cancel/withdraw from this Program there will be a \$100.00 cancellation/withdrawal fee and any balance on account will be due at the time of withdrawal.

PARENT INFORMATION

If separate households, please check parent to be billed: \_\_\_Mother \_\_\_Father \_\_\_Both

Mother/Guardian Name: \_\_\_\_\_ Phone \_\_\_\_\_ Cell Provider \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_ Phone \_\_\_\_\_ Cell Provider \_\_\_\_\_

It is understood that the provisions set forth in this enrollment application, together with the provisions of the current Parent/Student Handbook, constitute the enrollment contract in its entirety and that if the above named child is accepted for enrollment in this program, the undersigned expressly agrees to the terms and provisions of this contract.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name: \_\_\_\_\_