



GoodEarth Montessori School Registration Application

2593-A Chino Hills Parkway, Chino Hills, CA 91709 tel (909) 393-0998 fax (909) 248-2575
 goodearthmontessorischool.com

Date of Desired Admission _____
 How did you hear about our school _____

Name of Student _____ Sex _____ Age _____ Date of Birth _____
 Home address _____ City _____ Zip _____
 Telephone # _____ Is student potty trained? _____
 Parent's Name _____ Business/Cell Phone _____
 Occupation _____ BusinessAddress _____

Parent's Name _____ Business/ Cell Phone _____
 Occupation _____ BusinessAddress _____

Parent Email address - tuition invoices will be sent here

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Can you recommend any community programs or do you have any special talents that you would like to share with our students? Your input will help broaden our students' experiences and enrich their classrooms.

Child lives with: Both parents 1st parent listed 2nd parent listed Other
 If child does not live with both parents, does parent not living with child have permission to pick up child from school? Yes No

Check program preference:

Preschool Programs:	Kindergarten Programs:
<input type="checkbox"/> Half School Day, 9:00AM-12:00NN <input type="checkbox"/> Half School Day + Before School Childcare, 6:30AM-12:00NN <input type="checkbox"/> Full School Day, 9:00AM-3:00PM <input type="checkbox"/> Full School Day + Before School Childcare, 6:30AM-3:00PM <input type="checkbox"/> Full School Day + After School Childcare, 9:00AM-6:30PM <input type="checkbox"/> Full Extended School Day, 6:30AM-6:30PM <input type="checkbox"/> Milk Club –daily milk @ lunchtime	<input type="checkbox"/> Full School Day, 9:00AM-3:00PM <input type="checkbox"/> Full School Day + Before school childcare, 6:30AM-3:00PM <input type="checkbox"/> Full School Day + After school childcare, 9:00AM-6:30PM <input type="checkbox"/> Full Extended School Day, 6:30AM-6:30PM <input type="checkbox"/> Milk Club –daily milk @ lunchtime
How Many Days? <input type="checkbox"/> 2 Days <input type="checkbox"/> 3 Days <input type="checkbox"/> 4 Days <input type="checkbox"/> 5 Days Which Days? <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	*Must attend school 5 days per week Student must be 5 years old by September 1 st of current school year to be considered a kindergartener

List any unusual health conditions, allergies, medical requirements or dietary restrictions _____

I tuition fees and programs and I am aware of the following:

- Tuition payments are due on the first day of every month. A \$25.00 late fee will be assessed if payment is received after the 5th day of the month.
- There is NO credit, nor reimbursements given for school absences (due to illness, holidays, vacations, etc.) and NO make-up days are allowed.
- A 2 week written notice is required for withdrawal from GoodEarth Montessori School.

I am paying the required registration fee to reserve my child's class placement. I know that it is **non-refundable** if I decide not to enroll my child. I agree to read and support the school handbook I am given upon enrollment.

Parent/Guardian Signature _____

-----**For Office Use Only**-----

Date _____

Registration Paid \$ _____ () Cash () Check

Rec'd by _____

Assigned Classroom _____