



Phoenix Montessori School

2019-2020 REGISTRATION

CHILD

Name:
last name given names (underline name used)

Birth Date (MM/DD/YYYY): Sex: female male

Street Address:

City: Province:

Telephone (landline): Postal Code:

Language(s) (other than English):

PARENT/GUARDIAN

primary contact for administration and classroom guide (only one parent/guardian may have this designation)

Name:
last name given names (underline name used)

same address as child (if not please fill in section below)

Street Address:

City: Province:

Telephone (cell): Postal Code:

E-mail:

BUSINESS

Occupation and Position:

Business Name:

Telephone: extension:

PARENT/GUARDIAN

primary contact for administration and classroom guide (only one parent/guardian may have this designation)

Name:
last name given names (underline name used)

same address as child (if not please fill in section below)

Street Address:

City: Province:

Telephone (cell): Postal Code:

E-mail:

BUSINESS

Occupation and Position:

Business Name:

Telephone: extension:

SIBLING(S)

Name: Age: Current School:

Name: Age: Current School:

Name: Age: Current School:

EMERGENCY CONTACT (not a parent)

Name: Telephone:

Relationship to child:

MEDICAL

Physician's Name:

Address:

Telephone:

Please list any **illnesses, operations, accidents** or **communicable diseases** which your child has experienced as well as the approximate date of occurrence. If this is not applicable to your child, please write 'none.'

- 1.
- 2.
- 3.
- 4.
- 5.

Please list any significant medical **condition** or **allergy** that your child may currently have and require treatment for. If this is not applicable to your child, please write 'none.'

- 1.
- 2.
- 3.

DIETARY REQUIREMENTS

Please list any non-anaphylactic dietary requirements that the school should be aware of (i.e. vegetarian, no dairy, etc.). If this is not applicable to your child, please write 'none.'

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.....

RESTING REQUIREMENTS

Please provide us with any specific instructions relating to your child's napping schedule which the school should be made aware of. If your child does not nap, please write this.

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AUTHORIZED PICK UP CONSENT

Please list any people (other than the parents/guardians) and their relationship to your child, who have permission to pick up your child at any time without the school calling you. Please also re-list your 'emergency contact' if they are to have this privilege. Please note that you can write 'none' and then just call in or e-mail any special pick up requests as required. People with this designation will be required to show photo identification at the time of pick up.

- 1.
- 2.
- 3.

PHOTO PERMISSION

- yes, we give permission for our child's photo to be used on the website, Owlwise, Instagram (private account only), for other promotional purposes and in the yearbook
- yes, we give permission for our child's photo to be used in the yearbook only
- no, we would prefer that our child's photo not be used by the Phoenix Montessori School for any reason without specific permission

PARENT HANDBOOK + CALENDAR

We have read a copy of the Phoenix Montessori School's 'Parent Handbook'

We have read and reviewed the calendar with a member of administration and are aware of all closures and parent information evenings

NUT AWARE FACILITY

The Phoenix Montessori School is a nut-aware facility. This means that no nuts or products that 'may contain' nuts may be brought or consumed on school property. If your child consumes nuts/nut products before school, please be sure that they are thoroughly cleaned (skin and clothing) before leaving home, so as not to affect the health of children who may have anaphylactic allergies. 2

PROGRAM + FEE SCHEDULE

*Catered lunch fees are included in the tuition for these programs

- Nido (birth - 18 months)*
- Half-day Young Children's Community (18 months - 2.5 years)*
- Full-day Young Children's Community (18 months - 2.5 years)*
- Half-day Casa (2.5 - 4 years)
- Casa Afternoon Program (2.5 - 4 years)*
- Full-day Casa (4 - 6 years)*
- Elementary (6 - 12 years)

- Schedule A (all programs)
- Schedule B (all programs)
- Schedule C (Nido ONLY)

Please make all cheques payable to **The Phoenix Montessori School Inc.**

All NSF cheques are charged an additional \$45 fee

FAMILY DIRECTORY + SOCIAL MEDIA

The administration is permitted to give out your e-mail or phone number information to other parents whose children attend the school in order to facilitate playdates and party invites.

- yes, please share my e-mail or phone number
- no, we would prefer for our information to be released only with permission

Phoenix has several social media platforms that we use to communicate with parents as well as to advertise our school to the general public. Find us on Facebook as Phoenix Montessori School and follow us on instagram @phoenixmontessorischool

- please add me/us to the PRIVATE Phoenix Montessori Instagram account @phoenix_families

@ _____ @ _____

ACCEPTANCE OF TERMS + CONDITIONS

Tuition

A student may not attend school in September (or any other start date) if tuition is in arrears or an alternate payment plan has not been approved by the administration

Withdrawal Policy

scheduled start date: _____

The administration fee is non-refundable

The tuition deposit is non-refundable

The commitment fee is non-refundable

30 days notice in writing is required in order for a fee refund to be processed

Withdrawal before scheduled start date (September or otherwise): tuition deposit and **25% of tuition (paid and owing)** will be retained

Withdrawal after start date (September or otherwise): tuition deposit and **45% of tuition (paid and owing)** will be retained

For each 30 days after start date an **additional 10% of tuition (paid and owing)** will be retained

I/We have read and reviewed the above terms and conditions as well as the detailed 'Terms of Withdrawal' section in the Parent Handbook

We the parent(s)/guardian(s), acknowledge the above withdrawal policy and agree to enrol our child for the academic year. There is no reduction to fees (tuition, busing, catered lunch, afterschool programs, etc.) as a result of any absences. The Phoenix Montessori School reserves the right to terminate a student's enrolment if the Administration decides that it is to the benefit of the student, class, teacher or the school community.

X
signature

Date:

X
signature

Date:

ATTACHMENTS

- copy of child's up to date immunization record (new enrolments or updated records)
- signed and dated copy of the 2019-2020 school calendar (acknowledgement of school closures due to breaks and holidays)
- busing form (if requested)
- catered lunch payment (optional for Elementary students)
- commitment form and fee (if required)
- Before/After School Program forms (if requested)
- all other applicable forms (outdoor permission, toileting policy, health and wellness policy, etc.)

For office use ONLY:

Administrative Approval

Acceptance Date: _____

X

Start Date: _____

X

Withdrawal Date: _____

X

Date of Dismissal: _____

X
