LITTLE HANDS MONTESSORI ENROLMENT FORM

Date of Application Application fee $ 50

Please encircle one : Parent Infant Program / Parent Toddler Program

Term : \_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Child’s Full Name:** |  | | | **Child’s Date of Birth:** |
| **Gender:** | **Male**: | **Female**: | | |
| **Mother’s Name:** | **First Name**: | | **Family** **Name**: | |
| **Occupation:** |  | | | |
| **Full Address:** |  | | | |
| **Email address:** |  | | | |
| **Mobile:** |  | | | |
| **Father’s Name:** | **First** **Name**: | | **Family** **Name**: | |
| **Occupation:** |  | | | |
| **Full Address:** |  | | | |
| **Email address:** |  | | | |
| **Mobile:** |  | | | |

**ADDITIONAL INFORMATION**

If your child has attended another Montessori School (eg, Under 3’s) or has any siblings who have previously attended either Castlecrag Montessori School or another Montessori school, please give details:

Name of Child/ren/Sibling/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School and Period of Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION:**

|  |  |
| --- | --- |
| I/We hereby make application for my/our child as listed above. The application fee **($50)** is non-refundable and required to place your child on our waitlist for the program. | |
| **Signature:** | **Date:** |

|  |
| --- |
| **PAYMENT DETAILS**  **Anniebelle Vergel de Dios**  **Online bank transfer: BSB: 082-057**  **Account Number: 92 – 143- 0208**  **Reference : Child’s Name** |

**Schedule of Fees 2020**

Parent Infant Program $175 per term (5 weeks)

Parent Toddler Program $385 per term (9 or 10 weeks)

**Term 2020**

**Parent Toddler**

Term 1 - Tuesday 4 February to April 8 (10 weeks)

Term 2 – Tuesday 28 April to 1 July (10 weeks)

Term 3 – Tuesday 21 July to 23 September (10 weeks)

Term 4 – Tuesday 13 October to 11 December (9 weeks)

**Parent Infant**

Term 1

1. 4 February to 3 March
2. 10 March to 7 April

Term 2

1. 28 April to 26 May
2. 2 June to 30 July

Term 3

1. 21 July to 18 August
2. 25 August to 23 September

Term 4 - 13 October to 17 November

*There’s a 5 week option for each term except for Term 4 which will have (6 weeks)*

**Fees Policy**

* Term fees are payable by the start of each term (an invoice will be emailed)
* Fees are non-refundable or transferrable if you’re unable to attend a class

Little Hands Montessori seeks your permission to use photographic and digital images, video for publications, newsletters, websites, social media platforms, other related methods of promotion, any future editions and variations of the above, and both electronic and printed formats of the above.

PERMISSION TO USE CHILD’S PHOTOGRAPHS

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I do give / do not give permission for photographs of my child to be published in local newspapers, website or social media platforms. Names or other personal information won’t be disclosed.

Parent’s Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_