

# Zen Montessori Application

I. Child's name: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male  Female  Intended start date \_\_\_\_\_

Parents \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone and E-mail \_\_\_\_\_

## Children's House (2 - 6 year olds)

5 Mornings 9am - noon \$1000/month includes violin instruction

5 School Days 9am - 3:30pm \$1400 month includes violin instruction

## II. Getting to know your child and your family:

Other children in the family, name(s) and age(s)

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*What is your child's previous early childhood care experience? (at home, daycare, nanny, school, etc.)*

*Please list your child's interests, strengths and unique characteristics?*

*What are your hopes and dreams and expectations for your child, while in our care and beyond?*

*What is your philosophy on "screen time" (television, videos, computer)? How much screen time does your child have each day/week?*

*Provide a brief description of your child's eating, sleeping and communicating habits. Does your child take an afternoon nap? We would also like to know effective methods of comforting your child.*

*Does your child have toileting accidents? How often? When are they most likely to occur?*

*Please tell us anything else you would like us to know about your child (allergies, foreign languages spoken, etc).*

**III. Enrollment details:** The deposit (\$600) upon acceptance is applied to the first month tuition.

Parent/ Guardian \_\_\_\_\_ Date \_\_\_\_\_