

Montessori Connections Preschool Enrollment Form 2016/2017

Parent Names: _____

Address: _____

City, State, Zip Code: _____

Contact Phone Number/s: _____

Child/Children's Name/s: _____ Birth Date: _____ M __ F __

_____ Birth Date: _____ M __ F __

_____ Birth Date: _____ M __ F __

Please check the session/s needed

Monday - Friday 8:30am - 11:30 am	_____	\$3800
8:30am - 3:00 pm	_____	\$5800

Please complete this form and submit **\$100 enrollment fee** (This is subtracted from the total tuition and is **non-refundable**).

**Mail to: Montessori Connections Preschool
6810 Old 28th St. SE Suite 1
Grand Rapids, MI 49546**

After enrollment is received, you will be contacted to confirm and receive a Parent Packet with more information and required forms. If you have any questions, please call 616-874-5427 or 616-940-4616 or email us at: montessoriconnectionsgr@gmail.com.

School year begins September 6, 2016 and ends June 8, 2017