

Montessori Connections 2016 Summer Enrollment Form

Parent(s) Names _____

Address _____

City, State, Zip _____

Contact Phone Number/s _____

Child/Children's Name/s _____

Birth Date/s _____ M__ F__

_____ M__ F__

Please indicate weeks desired. The cost listed is per week Monday-Friday, or there is an option for the whole summer session (8 weeks: June 6 - July 29 M-F)

		<u>8:30 -11:30</u>	<u>8:30-3:30</u>
June 6-10	___	\$100.00	\$150.00
13-17	___	\$100.00	\$150.00
20-24	___	\$100.00	\$150.00
27-July 1	___	\$80.00	\$120.00
July 5-8	___	\$100.00	\$150.00
11-15	___	\$100.00	\$150.00
18-22	___	\$100.00	\$150.00
25-29	___	\$100.00	\$150.00
Full session	___	\$700.00	\$1000.00