



Application Form

Please check off the session your child will be attending for the September 2010 - June 2011 school year

3 day (3 yrs. & younger) 5 day Kindergarten Kindergarten Extension

Child's Name _____ Date of Birth _____ Age _____

Address _____

City _____ State _____ Zip Code _____ Phone _____

Mother's Name _____ Occupation _____ Work # _____ Cell # _____

Work Address _____ City _____ State _____ Zip Code _____

Father's Name _____ Occupation _____ Work # _____ Cell # _____

Work Address _____ City _____ State _____ Zip Code _____

Doctor's Name _____ Phone _____

Doctor's Address _____

City _____ State _____ Zip Code _____

NEIGHBOR or LOCAL RELATIVE who can pick up your child in an emergency:

Emergency Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

How did you hear about the school? Please specify publication if an ad. _____

☞ Registration Fee: \$35.00/per child—payable with application—Registration Fee is **NON-REFUNDABLE.**

☞ To reserve your child a position in Sept. '10 class a deposit of 1 month's tuition is required. **TUITION PAYMENT IS NON-REFUNDABLE.**

☞ 10% discount on second child's tuition.

Morning Classes

Kindergarten Monday - Friday	9:00 am - 12:00 pm	\$500/month
Preschool Monday - Friday Mandatory all June graduates	9:00 am - 12:00 pm	\$470/month
Preschool 3 day program - 3 yrs. & younger -days to be assigned	9:00 am - 11:50 am	\$330/month

Afternoon Classes

Afternoon Nature & Activities Program Tues, Thurs. <i>Children work on art projects, play games, exercise & Naturalist gives a lesson. Please pack full lunch.</i>	12:00 pm - 2:30 pm	\$32/day
Kindergarten Extension Program Tuesday, Thursday <i>Extends kindergarten academics 1 or 2 days a week.</i>	12:00 pm - 2:30 pm	Tuesday, Thursday \$195/month One Day \$118/month

☞ Tuition is due the 15th of every month. Any parent who has not paid tuition by the 15th of the month will be charged a late payment fee equaling 10% of that month's payment. This new payment is due the 22nd of the month.

☞ The holidays in the EMS school year calendar are similar to the Basking Ridge school year calendar with minor differences.

Permission Form

All applicants MUST complete and sign everything located on the front of this form, Section A and Section C as required by the state of New Jersey. Fill out Section B if you are naming a substitute to sign permission forms. Failure to fill out the form correctly may delay the processing of your application. Should you have any questions, please contact Mrs. Walsh.

Section A- One parent must sign the signature line in this section.

- ❖ By signing below I acknowledged that I have received the New Jersey State Information to Parents statement from the Environmental Montessori School. (This is a separate form that was given to you with the application.) and have read the following statements:
 - ☞ In case of emergency, the Environmental Montessori School or the Environmental Education Center has my permission to obtain emergency treatment for my child.
 - ☞ While I am at the Environmental Education Center, I am solely responsible for my child's safety at all times when my child is outside the Environmental Montessori School classroom, especially during arrival and departure of the child.
 - ☞ I give permission for my child to have access to the complete Environmental Education Center facility when supervised by the Environmental Montessori School staff, the Environmental Education staff or both.

- ❖ List below the name of the person who will pick up your child in case of emergency and anyone who will pick up your child from school other than the parents (caregiver, carpool parent, play date mom, etc.). These people are responsible for your child's safety once they have left the EMS classroom.

I, (Parent's Name) _____ give my permission to (list all names):
_____, _____, _____, _____,
_____, _____, _____, pick up my child
from the EMS.

Parent Signature _____ Date _____

Section B- Fill out **ONLY** if you are naming a substitute to sign permission forms.

Please fill in the name of the person who will act as a substitute (i.e. caregiver) to sign all forms that are necessary for your child to participate in class trips or other activities the EMS sponsors. Your substitute is responsible for informing you of all such permission grants.

Substitute's Name _____

Section C- ALL APPLICANTS MUST SIGN THIS SECTION.

I have read and understand the information on this entire application. I have filled out and signed all parts of the application that apply to my child and myself.

Parent Signature _____ Date _____