



5114 Jefferson Ave.
Midland, Michigan 48640
989-835-1101
 www.mchkids.net
 info@mchkids.net

Applying for 20_____

- Class Day AM or PM
- Extended Day AM or PM
- Full Day
- After-School Care
- Before-School Care

Registration Form

CHILD

First	Middle	Last
<input type="checkbox"/> Male	Date of Birth	Age years months
<input type="checkbox"/> Female	Place of Birth	
Social Security Number (optional) _____		
Previous school experience:		
Montessori school		duration
Other school		duration

Reason for applying to MCH: _____

Referred by: _____

How did you hear about MCH?

MOTHER or GUARDIAN

FATHER or GUARDIAN

Name _____
 Home Address _____

 Occupation _____ Work Phone _____
 Home Phone _____ Cell Phone _____
 Email Address _____

Name _____
 Home Address _____

 Occupation _____ Work Phone _____
 Home Phone _____ Cell Phone _____
 Email Address _____

Student Lives With: Both Parents Mother Father **other, specify** _____

BROTHERS & SISTERS**GRANDPARENTS**

Name and ages _____

Name and addresses _____

APPLICATION PROCEDURE

1. Parents, by appointment, observe a class in the school and meet with the Director for a tour.
2. Parents submit an application and a non-refundable fee of \$125 to MCH.
3. All prospective students and parents are interviewed by the Director through a home visit and orientation.
4. Upon acceptance, the first month's tuition along with additional paperwork is due.

Signatures of Parents or Guardians: _____

Date: _____

Mother/Guardian _____ Father/Guardian _____

Montessori Children's House has a non-discriminatory policy relative to race, color, and national origin with respect to the admission of students and the employment of faculty and administrative staff.

Montessori Children's House considers the records of all individual students to be confidential information available to a child's parents or guardians upon request. Records will only be released to other schools or agencies upon signed request from a parent or guardian and only after all accounts due are paid in full.

Montessori Children's House reserves the right to balance the enrollment of each class by age and sex.

This application constitutes application to the Montessori Children's House, Inc.

OFFICE USE ONLY:

Date Received _____ Preschool/Kindergarten: 1/2 Day _____ Ext. Day _____ Full Day _____

Date(s) of Home visit _____ Orientation _____ Childcare: Before _____ After _____ Transportation _____

First Day of Class _____ School Name: _____

Assigned Class _____

FEES PAID: \$125 Application Fee _____ Check # _____1st Months Tuition _____ Check # _____ Materials _____

*Please include: Copy of Parent's Drivers License _____ Child's Birth Certificate _____