

## GoodEarth Montessori School Registration Application

Goodearthmontessorischool.com • 2593-A Chino Hills Parkway, Chino Hills, CA 91709 • tel (909) 393-0998 • fax (909) 393-5338

Name of Student \_\_\_\_\_ Date of Desired Admission \_\_\_\_\_  
 Sex \_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_ Is student potty trained? \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone # \_\_\_\_\_

Parent Email address \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Business/Cell Phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Business Address \_\_\_\_\_

Father's Name \_\_\_\_\_ Business/Cell Phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Business Address \_\_\_\_\_

How did you hear about our school? \_\_\_\_\_

Can you recommend any community programs or do you have any special talents that you would like to share with our students?  
 Your input will help broaden our students' experiences and enrich their classrooms.

\_\_\_\_\_

Child lives with: \_\_\_\_ Both Parents \_\_\_\_ Mother \_\_\_\_ Father \_\_\_\_ Other  
 If child does not live with both parents, does non-resident parent have permission to pick up child from school?  
 \_\_ Yes \_\_ No

Check program preference:

| <b>Preschool Programs:</b>   | <b>Kindergarten Programs:</b>  |
|--|--|
| <input type="checkbox"/> Half School Day, 9:00AM-12:00NN<br><input type="checkbox"/> Half School Day + Before School Childcare, 6:30AM-12:00NN<br><input type="checkbox"/> Full School Day, 9:00AM-3:00PM<br><input type="checkbox"/> Full School Day + Before School Childcare, 6:30AM-3:00PM<br><input type="checkbox"/> Full School Day + After School Childcare, 9:00AM-6:30PM<br><input type="checkbox"/> Full Extended School Day, 6:30AM-6:30PM<br><br><input type="checkbox"/> Milk Club –daily milk @ lunchtime | <input type="checkbox"/> Full School Day, 9:00AM-3:00PM<br><input type="checkbox"/> Full School Day + Before school childcare, 6:30AM-3:00PM<br><input type="checkbox"/> Full School Day + After school childcare, 9:00AM-6:30PM<br><input type="checkbox"/> Full Extended School Day, 6:30AM-6:30PM<br><br><input type="checkbox"/> Milk Club –daily milk @ lunchtime |
| How Many Days? ( ) 2 Days ( ) 3 Days ( ) 4 Days ( ) 5 Days<br><br>Which Days? ( ) Monday ( ) Tuesday ( ) Wednesday ( ) Thursday ( ) Friday   | *Must attend school 5 days per week<br>Student must be 5 years old by December 2 <sup>nd</sup> of current school year to be considered a kindergartener  |

List any unusual health conditions, allergies, medical requirements or dietary restrictions \_\_\_\_\_

\_\_\_\_\_

I agree to pay my child's tuition monthly by cash or check payment. If tuition is not paid by the 5<sup>th</sup> of the month, a \$20.00 late fee will be assessed. There are no credits for absences or school holidays. Attached is my registration fee to reserve my child's space. I understand that this fee is non-refundable if I decide not to enroll my child or withdraw during the year. I have received a copy of the parent handbook and have been informed of the school's tuition fees and programs.

Parent/Guardian Signature \_\_\_\_\_

-----For Office Use Only-----

Date \_\_\_\_\_ Registration Paid \$ \_\_\_\_\_ ( ) Cash ( ) Check

Rec'd by \_\_\_\_\_ Assigned Classroom \_\_\_\_\_