



Application Date:  Requested Start Date:

Child's Last Name:  First Name:  Middle Name:

Home Address:  City:  State:  Zip Code:

Child's Age:  Child's Birth date:  Gender:

Mother's Name:  Father's Name:

Mother's Address:  Father's Address:

Home Phone:  Cell Phone:  Home Phone:  Cell Phone:

Email Address:  Email Address:

**Please check appropriate program and days your child will attend  
(see Program & Tuition page for details):**

<b>Nido:</b>		<b>Toddler:</b>		<b>Primary:</b>					
5 Full Days	<input type="checkbox"/>	5 Full Days	<input type="checkbox"/>	5 Full Days	<input type="checkbox"/>	5 Academic Days	<input type="checkbox"/>	5 1/2 Days	<input type="checkbox"/>
3 Full Days	<input type="checkbox"/>	3 Full Days	<input type="checkbox"/>	3 Full Days	<input type="checkbox"/>	3 Academic Days	<input type="checkbox"/>	3 1/2 Days	<input type="checkbox"/>
2 Full Days	<input type="checkbox"/>	2 Full Days	<input type="checkbox"/>	2 Full Days	<input type="checkbox"/>	2 Academic Days	<input type="checkbox"/>	2 1/2 Days	<input type="checkbox"/>

**Important Enrollment Notes:**

**Sibling Discount:** 5% off the oldest student's tuition

**Application Fee:** \$125 (one time, non-refundable)

**Enrollment Fee:** \$100 (annual, non-refundable, due with first tuition payment) Prior to your child's first day all enrollment forms (Student Record and Medical/ Immunization Form) must be completed, signed, and returned to the school. The first month of tuition is due upon the first day of attendance.

Note: Receipt of this form does not guarantee enrollment. Enrollment will be confirmed on classroom space available, requested start date and prior applications. Confirmation of enrollment status will be advised within 10 days of receipt of application.

**Mail completed application and check for the application fee to:**  
**Mountain View Montessori**  
**13785 Huron Street Broomfield, CO 80023**

Office use:	
Date Received	Waitlist
Confirmation	Classroom