

# Montessori School of Manhattan Beach

## APPLICATION FORM

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Male Female

I have a sibling currently enrolled: Yes No I have a sibling currently on the waitlist: Yes No

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Firm: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Firm: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Desired Starting Date: \_\_\_\_\_ Campus: Peck \_\_\_\_\_ Bell \_\_\_\_\_

**\*\* (Start date will be determined by availability) \*\***

Currently Potty Trained: Yes No

Desired Schedule:	Half Day AM	_____	9:00 am – 12:00 pm
	Half Day PM	_____	12:00 pm – 3:00 pm
	Full Day	_____	9:00 am – 3:00 pm
Extended Day Care:	Morning	_____	7:00 am – 9:00 am
	After School	_____	3:00 pm – 6:00 pm

*Toddler Program (18months)*  
**(BELL CAMPUS at this time)**

Half Day \_\_\_\_\_ 9:00 am – 12:00 pm

Toddler Extended Daycare  
**(BELL CAMPUS at this time)**

Monday – Friday \_\_\_\_\_ 12:00 pm – 6:00 pm  
Per Day \_\_\_\_\_ 12:00 pm – 6:00 pm

I have enclosed the one-time application fee of \$300. I understand this fee is **neither refundable nor applicable toward tuition.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Ck #:

Amt: