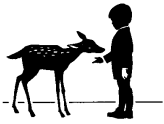


Parent-Child Application

Deer Path Montessori School

Paragon Village
429 Route 46 East, Hackettstown, NJ 07840
908-498-0500 office@deerpathmontessori.com



Date: _____

Child's Name _____ Date of Birth _____
Last First Middle

Address _____ Sex Male Female
Street

City State Zip Code Phone #

Mother/Guardian _____	Occupation _____
Firm _____	Address _____
Working Hours _____	Business Phone _____
Email _____	Cell/Pager _____
Father/Guardian _____	Occupation _____
Firm _____	Address _____
Working Hours _____	Business Phone _____
Email _____	Cell/Pager _____

Names and ages of siblings: _____

If there is any unusual custody situation, explain briefly: _____

Does your child have special physical or emotional issues? Explain _____

Is your child receiving any treatment or medication regularly? Explain: _____

How did you learn about our school? _____

Please list any adults who will be accompanying your child to the class and their relationship: _____

Signature of Parent or Guardian: _____ **Date:** _____

See reverse for program choice and tuition information.

Parent Child Program

Summer 2008

Summer Session (Thursdays)

Orientation: July 8 (7:00 PM)

Classes: July 10, 17, 24, 31, August 7, 14

2008-2009 School Year

Please check the session(s) you are interested in attending.

Choose Session/s:

Session I (Thursdays)

Orientation: September 23rd (7 PM)

Classes: Sept. 25, Oct. 2, 9, 16, 23, 30

Session II (Fridays)

Orientation: January 6th (7 PM)

Classes: Jan. 9, 16, 23, 30, Feb. 6, 13

Session III (Fridays)

Orientation: February 24th (7 PM)

Classes: Feb. 27, March 6, 13, 20, 27, April 3

Session IV (Fridays)

Orientation: April 21st (7 PM)

April 24, May 1, 8, 15, 22, 29

Parent-Child Tuition:

Application fee: \$ 50.00

Tuition per 6 week session: \$ 200.00

A non-refundable application fee of \$ 50.00 must accompany the application. The tuition fee must be paid one week prior to the start of the session.

For official use only

Date Application Received _____ Amount Received \$ _____ Check # _____

Date Tuition Payment Received _____ Amount Received \$ _____ Check # _____