



Williamsburg Montessori
 Schaefer Landing 450 Kent Ave Brooklyn, NY 11249
 t (718) 384-3400 f (718) 354-8904
www.Williamsburg-Montessori.org
 Email: info@WMSNY.org

APPLICATION / PRESCHOOL 3-6 YEAR OLD 2020-21

Parent/Guardian Information

Registration Date: _____

Parent 1 / Guardian First Name: _____ M.I. _____ Last Name: _____
 Address: _____
 Occupation: _____ Home Phone: () _____
 Employed By: _____ Office Phone: () _____
 Work Address: _____ Work Hours: _____ Cell Phone: () _____
 Driver's License #: _____ Last 4 Digits of SS#: (Security Question) _____
 Email: _____ Custodial Parent Yes No Both

Parent 2 / Guardian First Name: _____ M.I. _____ Last Name: _____
 Address: _____
 Occupation: _____ Home Phone: () _____
 Employed By: _____ Office Phone: () _____
 Work Address: _____ Work Hours: _____ Cell Phone: () _____
 Driver's License #: _____ Last 4 Digits of SS#: (Security Question) _____
 Email: _____ Custodial Parent Yes No Both

Child Information

1st Child First Name: _____ M.I. _____ Last Name: _____
 Name child prefers to be called: _____ Grade/Class: _____
 Child's Address: _____
 Gender: Male Female Date of Birth: _____ Child's S.S. #: _____
 Nursery / Preschool / Daycare Previously Attended _____
 Primary Language Spoken at Home _____ Secondary _____
 First Date of Anticipated Enrollment _____
 List any existing medical conditions, medication and/or special attention your child may require?

Allergies: _____
 Pediatrician's Name: _____ Phone: () _____
 Address: _____

Additional Comments & Information:

Is there is any other information that that would be helpful to our management and teaching staff?

Photos: May we photograph your child for security purposes? Yes No
 May we photograph your child for Newsletters etc ? Yes No



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Alternate Emergency Contacts & Authorized Pickup Persons (Other than Parent / Guardian):

1st Contact / Pick Up Name: _____ Phone: _____

Relationship to the Child: _____

2nd Contact / Pick Up Name: _____ Phone: _____

Relationship to the Child: _____

2020/21 Preschool 3-6 Annual Tuition:

5 Day Full Session 8:30am-3:30pm	<input type="checkbox"/> Option A - \$22,850.00	1 Installment - Payable July 1, 2020
	<input type="checkbox"/> Option B - \$23,350.00	4 Installments - Payable July 1, Aug 1, Sep 1, Oct 1, 2020
	<input type="checkbox"/> Option C - \$23,850.00	8 Installments - Payable July 1, 2020 through Feb 1, 2021

Early and extended care options: (Monthly Fee)

5 Day Early AM Drop off 7:30am-8:30am \$ 180.00 5 Day Afterschool Program 3:30pm-6:00pm \$ 525.00

The Early Drop Off and Afterschool schedule can be adjusted midyear, if available. We require 30 day notice for schedule changes.

Registration, Enrollment & Acceptance for the Sep 2020/21 School Year

1. **Early Decision Requested:** Applications Sep through Dec 2019 / Our acceptance notification within 10 days.
2. **Standard Enrollment schedule** Application due by Jan 22nd, 2020 / Our acceptance notification by Feb. 20th, 2020
3. Rolling Enrollment after deadline: Applications accepted upon availability. Our notification within 10 days.
4. **Acceptance & Enrollment : Non Refundable Payment \$3,000.00 due.**
 Within 10 days of your acceptance confirmation, you are due your signed tuition agreement along with your first tuition payment of \$3,000.00. (Balance will be billed according to your selected option a, b, c,)

Enrollment is contracted on a Full Year Schedule from Sep 1st (or from actual start date, if later) through late June, in accordance to our school calendar. Children attending our school have priority for our July/Aug Summer Camp Program, available to fully enrolled families.

Tuition is payable in accordance to the listed schedule and is nonrefundable. There are no refunds, credits or carryover for vacations, missed days, school closings, holidays, withdrawal or disenrollment.

Current families are invited in January for priority re-enrollment & sibling placement, (subject to a tuition increase of no greater than 5%). A student is considered priority enrolled for the following year once we receive back a completed application with the required deposit before January 31st. We cannot guarantee priority reenrollment for families after this date.

For CURRENT YEAR 2019-20 Enrollment Please indicate date you wish to start ____/____/____

We do have occasional current-year open enrollment, based on availability. If space for your child is immediately available, you will be emailed an acceptance confirmation and tuition agreement. Otherwise you will be placed on our wait list

Signature:

Parent 1 Signature: _____ Date: _____

Parent 2 Signature: _____ Date: _____

== Received at WMS by _____ Date: _____