



Orchardview
Montessori School

Orchardview Montessori School Enrolment Application 2012 - 2013

1367 St. Joseph Blvd.
Orleans, On., K1C 7K9
Phone: 613-424-7601
Fax: 613-424-7602

Requested Start Date:

Student Information

Student's Name: _____ Boy Girl Birth Date (D-M-Y): _____
Street Address: _____ Language spoken at home: Eng Fr Both
City: _____ Province: _____ Postal Code: _____ Home Phone: _____

Parent Information

Mother:	Father:
Name: _____	Name: _____
Home Address: _____ (if different than above)	Home Address: _____ (if different than above)
Employer: _____	Employer: _____
Work Address: _____	Work Address: _____
Work Ph.: _____ Alt. Ph.: _____	Work Ph.: _____ Alt. Ph.: _____
Email: _____	Email: _____

Emergency Contacts

1. Name: _____	2. Name: _____
Relationship: _____	Relationship: _____
Main Ph.: _____ Alt. Ph.: _____	Main Ph.: _____ Alt. Ph.: _____

Authorized Pick-Up

The following person(s) are hereby given authorization to pick up my child from Orchardview Montessori School in my absence.

1. Name: _____	2. Name: _____
Relationship: _____	Relationship: _____
Main Ph.: _____ Alt. Ph.: _____	Main Ph.: _____ Alt. Ph.: _____
3. Name: _____	4. Name: _____
Relationship: _____	Relationship: _____
Main Ph.: _____ Alt. Ph.: _____	Main Ph.: _____ Alt. Ph.: _____

Medical Information

Physician's Name: _____ Address: _____
Phone: _____ Health Card No.: _____ Expiry: _____ EpiPen?: Yes No
Allergies (Please describe and specify severity): _____

Dietary Restrictions: _____

Ongoing Medical Concerns: _____

I/we give permission that in the event of illness or an accident occurring to my child, Orchardview Montessori School will make every attempt to contact me and/or other parent. If, however, I or other parent cannot be reached, I/we hereby give Orchardview Montessori School and its Employees authority to act on my behalf in case of an emergency and to take appropriate steps to seek medical attention/have a doctor attend to my child.

Yes No Parent's signature: _____

Program/Tuition Information

Program	Toddler (18 - 30 months)	Casa (30 months - 6 years)
Half Day (8:30 - 12:00)	<input type="radio"/> \$800/month	<input type="radio"/> \$700/month
Full Day (8:30 - 3:30)	<input type="radio"/> \$1425/month (lunch/snack included)	<input type="radio"/> \$1125/month (lunch/snack included)
Extended Day (7:30 - 5:00)	<input type="radio"/> \$1580/month (lunch/snacks included)	<input type="radio"/> \$1275/month (lunch/snacks included)

Extended Hours (optional):

- After School - \$100 (3:30pm - 5:00pm)
- Before School - \$70 (7:30am - 8:30am)

- Ages are approximate and placement depends on the child's developmental abilities.
- Priority is given to full-day students. Half-day openings are limited.
- First and second year Casa students can be half-day or full-day. Third year students must be full-day.
- Toddler program is year round. Casa program is school year only or year round with reduced rates over the summer.
- The hot lunch and snack fees of \$150.00 is a cost- recovery surcharge due to the requirement of the Ministry of Child Services.
- Cost of late pick up after closing hours will be incurred at \$1.00 per minute with a minimum charge of \$10.00.
- 5% discount on lowest tuition for siblings attending at the same time.

Photo Consent and Authorization

Throughout the school year we like to capture memories of our students for the parent community through photographs. These pictures are not only important to the children when displayed, they help communicate the varied and rich activities the students are involved in throughout the school year. This consent only covers internal school and classroom use, separate permission forms will be required for photos to be used on the school website and/or for promotional materials.

- I consent to the use of my child's photo for internal use at Orchardview Montessori.
- I do not consent to the use of my child's photo for internal use at Orchardview Montessori.

Parent's signature: _____

Contract Terms

Application Process:

A completed application form with a non-refundable \$150 application fee is required for the application to be processed. Acceptance shall be confirmed in writing. Upon acceptance a non-refundable tuition deposit (last month's payment) is required within a week of acceptance along with the registration documentation, the post dated tuition cheques, and a \$150 activity fee. The child's space will only be confirmed/reserved upon receipt of these four items.

Tuition installments, in the form of post-dated cheques, starting the month of enrollment and post-dated for the first day of each subsequent month. Year round student cheques to be made from September-July (rates will be reduced over the summer months). School year students (Casa only) cheques to be made from September- May.

Please make cheques payable to "Orchardview Montessori School ". **N.S.F. cheques are subject to a \$35.00 charge**

Withdrawal Policy:

Parents who wish to withdraw their children from the school must give one month written notice. Child's deposit fee will be applied to her/ his last month in program. Failing to give enough notice will result in loss of money. If a child is being temporarily withdrawn, a space can not be reserved for the child unless fees are being paid continuously. Orchardview Montessori reserves the right to withdraw a child from the school if it considers this action to be necessary and in the best interest of the child or the class.

I/We hereby apply for admission of the above mentioned child. I/We have read and understand the registration information and agree to be bound by its contents.

Signature of Parent or Guardian: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

FOR OFFICE USE ONLY

Family Code ID#: _____ Other #: _____ Enrollment Date: _____ Date of Discharge: _____