REGISTRATION AGREEMENT FORM

	ontessori School ha for my child/		istration depo	sit of
to attend Cany	nat this deposit is to yoncito Montessori becomes availabl	School and Child	d Care Cente	r, Inc, when a

Parent or Guar	dian	******	Date	
Parent or Guar		*******	Date	
Child's Name:			DOB:	
Phone number	s: Home	Cell		Work
Starting Date:				
This registration	n is for: (please circ	cle one)		
Pre-school	Pre-Kindergarten	Kindergarten	Elementary	(grade)
Type of Progra	ım: (please circle	one)		
Full Day Ha	alf Day Number	of Days		
Paid check # _	Amo	ount \$	_ Date	