

**HALF DAY REGISTRATION FORM**  
**2017-2018**

I PLAN TO ENROLL MY CHILD in the Acarath Montessori Center for the 2017-2018 school year. I understand that enrollment includes Montessori, enrichment, lunch, and swimming daily.

**Half Day Schedule:**

9:20 – 9:30 Arrival  
9:30-10:15 Activities  
10:15-11:15 Swim  
11:15-12:00 Lunch  
12:00-12:15 Free Time  
12:15-2:30 Montessori  
2:30-2:35 Dismissal

**Activities**

Monday Sports Skills/Music  
Tuesday – Gymnastics/Art  
Wednesday – Dance/Music  
Thursday – Gymnastics/Art  
Friday – Dance/Music

**MONTHLY FEE: 5 DAYS/WEEK \$1075**

Please fill out the form below and submit a payment in the amount of \$537.50.

PARENTS NAME \_\_\_\_\_ PHONE NUMBER (    ) \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ GENDER M F DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(street) (town) (zip)

Dietary/Medical Restrictions \_\_\_\_\_

Email Address: \_\_\_\_\_

Failure to provide material information regarding the special needs, conditions, or background of the child for whom the application for admission is being made and any material misrepresentation of fact made in this application is grounds for denial of this application or termination of the child's attendance at Acarath Montessori School.

**NOTE:** Registrants and participants permit the taking of photos and videos of themselves and their children during School activities for publication and use as the School deems necessary.

[    ] I understand and agree that the deposit submitted with this form is **not refundable** but may be applied to my child's last full month at Acarath provided one month's notice is given.

**Half day fees do not include the following days: Veterans Day, Columbus Day, Winter Break, Martin Luther King Day, President's Day, and Spring Break.** If you are interested in having your child attend those days, you must pay the regular full day fee for the month.

\_\_\_\_\_  
(Parent Signature) (Date)