



# Children's House Montessori School

## Application Form

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Home Address: \_\_\_\_\_ Neighborhood Civic Association: \_\_\_\_\_

Parent/Guardian 1: \_\_\_\_\_ Personal Email: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Parent/Guardian 2: \_\_\_\_\_ Personal Email: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address if different than child: \_\_\_\_\_

Has your child received the gift of therapy (speech, O.T., etc.)? If so, please elaborate:

\_\_\_\_\_

List name(s) and age(s) of sibling(s): \_\_\_\_\_

How did you hear about Children's House Montessori School?: \_\_\_\_\_

Preferred Start Date: \_\_\_\_\_

### Alexandria Campus

#### **Toddler 18-33 months:**

8:00 a.m. - 12:00 p.m.

8:00 a.m. - 3:00 p.m.

8:00 a.m. - 5:30 p.m.

#### **Preschool 3-6 years:**

8:00 a.m. - 12:00 p.m.

8:00 a.m. - 3:00 p.m.

8:00 a.m. - 5:30 p.m.

### Arlington Campus

#### **Toddler 18-33 months:**

8:00 a.m. - 12:00 p.m.

8:00 a.m. - 3:00 p.m.

8:00 a.m. - 5:30 p.m.

#### **Preschool 3-6 years:**

8:00 a.m. - 12:00 p.m.

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