



HEARTWOOD MONTESSORI SCHOOL

112 Byrum Street ~ Cary, NC 27511 (919) 465-2113
www.heartwoodmontessori.com

APPLICATION FOR ENROLLMENT

Office Use

Rec'd: _____

RALL: _____

Acc: _____

Pd: _____

WLL: _____ #: _____

Decl: _____

Contract: _____

Class: _____

Date: _____

School Year: _____

Half Day Toddler	# days/week:	Kindergarten (Extended Day)
Full Day Toddler	# days/week:	
Half Day CH* (3 days) <i>for 3 yrs only</i>		Elementary Grade:
Half Day Children's House (5 days)		Middle School Grade:
Full Day Children's House (5 days)		High School Grade:

Name of Child _____
(last) (first) (middle) (nickname)

Age of child _____ Sex _____ Date of Birth _____ Siblings & ages _____

Referred by _____

Previous school(s) _____

Parent/Guardian 1's name _____

Parent/Guardian 2's name _____

Home address _____

Home address _____

Home phone _____

Home phone _____

Cell phone _____

Cell phone _____

Email address _____

Email address _____

Business name _____

Business name _____

Business phone _____

Business phone _____

Any other information you would like us to consider for the application, including previous Montessori experience:

Upon receipt of this application form, the school will notify you of your child's acceptance or waiting list status. A nonrefundable application fee of \$200.00 and a onetime \$450/family tuition deposit is due upon acceptance.

Applications are accepted year-round. Applications are considered in order of receipt.

*Information on tuition fees, program details, and other related topics can be found on our website:
www.heartwoodmontessori.com*