

"Free the child's potential and you will transform him into the world" - Maria Montessori

Changing the world, one child at a time... Kubo Montessori LLC

NAME OF CHILD:	AGE: _	D.O.B. :	
PLACE OF BIRTH: HOM	E PHONE:	EMERGENCY Contact	#:
HOMEADDRESS:			
DAYCARE/SCHOOL HISTORY:	(School and	d Program)	
POTTY TRAINING: () Yes () No () Almo	ost		
ALLERGIC TO:			
PRIMARY CARE PHYSICIAN:	(Na	me)jerome dreyfuss	
	(Phone	No.)	
PARENT INFORMATION:			
Father's Name:	Occupation:	email:	
Company Name:	Work Phone:		
Mother's Name:	Occupation:	email:	
Company Name:	Work Phone:		
In case of Emergency:		(Name and Phone No.)
Authorized person / relative for pick up:			(Name and Phone No.)

- Non-refundable Fee of \$50 upon Application
- Application depends on availability and order it was received

Kindly encircle desired schedule (attached)

NOTE: Any additional hour out of the regular schedule is \$15.50 extra.

Monday to Friday	9:00am – 5:30pm Full Day	\$1,400	Monthly tuition
Extra for potty training		+ \$150	
M/W/F	Full Day	\$850	Monthly tuition
Extra for potty training		+ \$150	
Tuesday / Thursday	Full Day	\$740	Monthly tuition
Extra for potty training		+\$150	
Afternoon Late pick up	5:30pm - 6:00pm	\$7.75	Daily
Early Care	8:00am - 9:00am	\$75.0 / \$15.50	Weekly / Daily