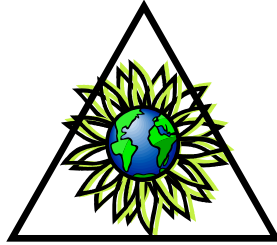


**MONTESSORI SCHOOL OF
NORTH HOFFMAN**

1200 Freeman Road
Hoffman Estates IL 60192-1727
(847) 705-1234
Fax: (847)705-0506



**LOTUS MONTESSORI
SCHOOL**

3805 Huntington Boulevard
Hoffman Estates IL 60192-1607
(847) 705-5678
Fax (847)705-5683

Summer 2010 Enrollment Form

Child's Name: _____ Date of Birth: _____
Last First

Parent / Guardian Name: _____

Address: _____

Phone Number: _____

Email Address: (Capital Letters Please) _____

I / We wish to enroll my child _____
In the Montessori School of North Hoffman's summer program.

Signature of Parent or Guardian Date

Please Circle the session(s) your child will attend:

Session I June 14th - July 2nd **Swimming I: Yes --- No ---** (if yes please sign a permission slip)
Please pick two:

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Painting/Drawing |
| <input type="checkbox"/> Sewing | <input type="checkbox"/> Typing |

Session II July 6th - July 23rd **Swimming II: Yes --- No---** (if yes please sign a permission slip)
Please pick two:

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Painting/Drawing |
| <input type="checkbox"/> Sewing | <input type="checkbox"/> Typing |

Session III Aug 2nd - Aug 20th **Swimming III: Yes --- No ---** (if yes please sign a permission slip)
Please pick two:

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Painting/Drawing |
| <input type="checkbox"/> Sewing | <input type="checkbox"/> Typing |

Continue on the back side -->

Please circle the program and desired days of the week:

Available Programs:

9:00AM - 12:00PM	M	T	W	TH	F	<i>(Not available for Elementary Sessions)</i>
7:00AM - 1:00PM	M	T	W	TH	F	
8:00AM - 4:00PM	M	T	W	TH	F	
7:00AM - 5:00PM	M	T	W	TH	F	
7:00AM - 6:00PM	M	T	W	TH	F	

Elementary

	5 Days	4 Days	3 Days
7AM - 1PM	\$648	\$608	\$567
8AM - 4PM	\$765	\$694	\$622
7AM - 5PM	\$800	\$739	\$677
7AM - 6PM	\$828	\$762	\$691

*** Session III: An additional \$130 is due for Camp Dewan***

Primary

	5 Days	4 Days	3 Days
9AM - 12PM	\$373	\$330	\$287
7AM - 1 PM	\$598	\$558	\$517
8AM - 4PM	\$714	\$643	\$572
7AM - 5PM	\$754	\$689	\$627
7AM - 6PM	\$784	\$712	\$640

Fees and Refund Policy:

Registration form must include \$30 application fee and one session fee. Session fees are due prior to the first day of each session. The application fee is non-refundable. Session fees are 100% refundable up to one week prior to the start of the session.

Office Use Only

Application Fee: _____ Date: _____ Check Number: _____