



## Application for Enrollment

*Official Use Only*

Date Received: \_\_\_\_\_  
Deposit Paid: \_\_\_\_\_  
Start Date: \_\_\_\_\_

CLASS PREFERRED: (Please mark the classes in order preferred, 1 being your first choice through 4 as your last choice.)

Blue (M-Th, AM) \_\_\_\_\_ Yellow (M-Th, PM) \_\_\_\_\_ Red (T-F, AM) \_\_\_\_\_ Green (T-F, PM) \_\_\_\_\_

STUDENT'S FULL NAME: \_\_\_\_\_ SEX: \_\_\_\_\_

NAME COMMONLY USED: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

ZIP: \_\_\_\_\_ HOME TELEPHONE: \_\_\_\_\_

Check here if parents do not live together. Please provide additional address and home phone on back.

MOTHER'S NAME: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ TEXT? YES / NO OK TO SEND PHOTOS? YES / NO

FATHER'S NAME: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ TEXT? YES / NO OK TO SEND PHOTOS? YES / NO

EMAIL ADDRESS (Will only be used for communication from CK Montessori.):  
\_\_\_\_\_

GENERAL HEALTH STATUS OF STUDENT (Describe any handicaps/allergies/special problems):  
\_\_\_\_\_  
\_\_\_\_\_

DO WE HAVE PERMISSION TO USE PHOTOS OF YOUR CHILD (un-named) ON OUR WEBSITE?

YES / NO If yes, please initial here: \_\_\_\_\_



REMIND: Once your child has been placed in a class, you will be invited to join 'Remind'. Remind is an app that we use for communicating (texting). Once you've joined, please confirm with us that you have gotten our message.

Please remit this form with a non refundable deposit of \$100.00.  
(Deposit will be deducted from June's tuition.)

*Thank you for your interest in our school!*

Central Kitsap Montessori \* 10323 Central Valley Rd NE \* Poulsbo, WA 98370 \* (360) 698-7620

**www.CKMontessori.com**