

Enrollment Date: \_\_\_\_\_

**Enrollment Fees**

**\$150.00 non-refundable registration fee.**  
**Only paid tuition fees will hold a space for a child.**



**20608 Sumner Buckley HWY Bonney Lake, WA 98391**  
**natashia@gmindsmontessori.com and 253-447-4445**

### Registration Form

Child: \_\_\_\_\_ Birthdate: \_\_/\_\_/\_\_ Sex: M\_\_ F\_\_

Child's Address: \_\_\_\_\_

Child's parent/guardian's name (1): \_\_\_\_\_ Email: \_\_\_\_\_

Address: Where you can be reached while your child is at our care: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_ Cell Phone: \_\_\_\_\_

Place of work: \_\_\_\_\_ Hours: \_\_\_\_\_

Child's parent/guardian's name (2): \_\_\_\_\_ Email: \_\_\_\_\_

Address: Where you can be reached while your child is at our care: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_ Cell Phone: \_\_\_\_\_

Place of work: \_\_\_\_\_ Hours: \_\_\_\_\_

### Emergency Contacts

Minimum 2 contacts, other than parents, to contact in case of emergency/authorized to pick up child:

1. Name: \_\_\_\_\_ 2. Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell or Work Phone: \_\_\_\_\_ Cell or Work Phone: \_\_\_\_\_

Other Person(s) Authorized to pick up child:

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: \_\_\_\_\_

### Tuition

Name (s) of individual(s) responsible for tuition: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Tuition will be paid in the amount of \_\_\_\_\_ due on the first of each month.

Signature of individual(s) responsible: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Additional information, notes or agreements made between this program and parents or guardians:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of parent/guardian)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of parent/guardian)

Referral Sources (Please circle all that applies)

**ADVERTISEMENT**

- Drive-by Sign
- Website/Facebook/Other
- Flyer
- Newspaper
- Event-

**REFERRAL**

- Parental Referral: \_\_\_\_\_
- Center Referral: \_\_\_\_\_
- Friend/Neighbor: \_\_\_\_\_
- Subsidy Program Referral
- USDA Food Program Referral