



**Summer School Registration/Tuition Agreement**  
*for summer school year 2017*

I hereby register my child for the Summer School program at Monte Vista Montessori School beginning \_\_\_\_\_ date \_\_\_\_\_.

Name of Student: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  girl  boy  
last name first name initial

Date of Birth: \_\_\_\_\_ SS# \_\_\_\_\_  
month / day / year

Home Address: \_\_\_\_\_  
(as it should appear in the student directory) street city zip

Home and Cell Phone(s): \_\_\_\_\_

Parent: \_\_\_\_\_, \_\_\_\_\_  
occupation

E-mail: \_\_\_\_\_  
work phone

Parent: \_\_\_\_\_, \_\_\_\_\_  
occupation

E-mail: \_\_\_\_\_  
work phone

Language(s) spoken by child: \_\_\_\_\_

Previous schooling of child: \_\_\_\_\_

Year of first enrollment at MVM: \_\_\_\_\_

I was introduced to MVM by: \_\_\_\_\_.

My child will be picked up between: \_\_\_\_\_ and \_\_\_\_\_ pm.

Tuition for the 2017 Summer School program: \$230.00 per week.

Please mark the weeks your child will attend:

- June 19-23,  June 26-30, (NO SCHOOL THE WEEK OF JULY 4TH),  
 July 10-14,  July 17-21,  July 24-28,  July 31-August 4

I have received copies of the policies and standards of Monte Vista Montessori School.

I understand the tuition payment schedule, and I agree to make all payments according to the plan I have selected and noted above.

Signature of Parent(s): \_\_\_\_\_ date \_\_\_\_\_  
(signature of both parents required.)

\_\_\_\_\_  
date

Signature for MVM: \_\_\_\_\_ date \_\_\_\_\_

*Administrator must meet the child in before registration will be accepted.*