



First Friends Montessori  
PO BOX 850, Fairfax CA 94978

415 459 7028

## NEW STUDENT

### First Friends Montessori Application Form School Year 2024-2025

#### Child's Information

Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age by Sept 1, 2024: \_\_\_\_\_ years, \_\_\_\_\_ months

*To qualify to enroll in our program at the start of the school year, a child should reach the age of 2 years and 6 months on or before September 1, 2024.*

#### Parent/Guardian(s) Contact Information

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Primary Mailing Address: \_\_\_\_\_

Do you currently have, or have you ever had, a child enrolled in First Friends Montessori?

\_\_\_\_\_

How did you hear about First Friends Montessori? \_\_\_\_\_

Tell us about your child and family

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



## Monthly Tuition Rates

Every child participating in the program must enroll for the Core Day, 5 days/week. We also offer Early Care and Afternoon Care as supplementary options. Please specify your preferred schedule by circling the program options below.

Program	Monthly Cost
Core Day 5 days/week 9-3PM <i>(All Students)</i>	\$2,300.00
Early Care 5 days/week 8-9AM <i>(Optional)</i>	\$285.00
PM Care 5 days/week 3PM-5PM <i>(Optional)</i>	\$570.00

## Annual Fees

<b>Annual Materials Fee</b> <i>This helps us repair and replenish the children's classroom materials.</i> <i>Fees are due in September and January.</i>	\$100/Semester
---	----------------

## Application Submission

Please enclose a \$100 non-refundable application fee along with this completed application form and mail to PO BOX 850 Fairfax, CA 94978.

Your signature below indicates that you are interested in applying to enroll your child at First Friends Montessori for the 2024-2025 school year.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

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