

Burlingame Montessori School

525 California Dr.

Burlingame, Ca. 94010

Ph: (650) 342-4445 Fax: (650) 342-4429

burlingamemontess@sbcglobal.net

Visit us on the web at www.burlingamemontessoriinc.org

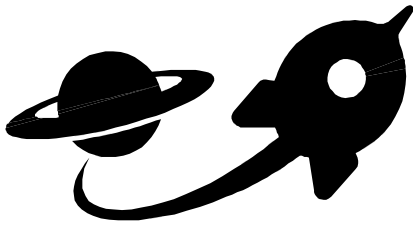


Summer 2009

Registration Form

Come join us this summer as we discover the adventure of space travel! Along with our full Montessori curriculum, we will be emphasizing the exploration of "the last frontier". We will begin with the sun and the solar system, moving outward from there to other constellations, the Milky Way, and other galaxies. Discover the vastness of space with hands-on science activities, creative arts and craft projects, puppet making, theatre and a field trip.

Child's Information		Start Date:	
Full name:	Preferred Name:		
Date of Birth:	Age:	Gender:	
Home Address:	City:	Zip Code:	
Home Phone:			
Mother's/Guardian's Information			
Full Name:	Email Address:		
Occupation:	Employer:		
Business Address:	City:	Zip Code:	
Cell/Daytime Phone:	Business phone:		
Father's/Guardian's Information			
Full Name:	Email Address:		
Occupation:	Employer:		
Business Address:	City:	Zip Code:	
Cell/Daytime Phone:	Business phone:		
Email Address:			
Emergency Information			
In case of emergency, please contact:			
Contact's address:	City:	Zip Code:	
Contact's phone:	Alternate Phone:		
Pediatrician's name:	Pediatrician's phone:		
Please list ANY of your child's allergies:			



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Six week summer Session: June 29th through August 7th.

Class Schedule and Fees		
Please check the box next to the days and times that you would like your child to attend.		
Full Day Class		9:00 – 1:00
<input type="checkbox"/>	Monday – Friday	\$1,200
<input type="checkbox"/>	Mon, Wed, Fri	\$990
<input type="checkbox"/>	Tues and Thurs	\$910
Fees are based on six weeks of classes and will be due in one payment.		

Please enclose the \$25 non-refundable summer registration fee with this document.

Amount Enclosed:	Date:
Parent's/Guardian's Signature:	
<p>Thank you for applying to Burlingame Montessori School!</p> <p>We will let you know about the status of your application when we receive it.</p>	

For Office Use Only

Date form was received:	Start Date:
Completed By:	Registration Packet sent on:
Sibling/Relative:	Placed in Database: Yes No