



**BRONXVILLE MONTESSORI SCHOOL**  
101 Pondfield Road West, Bronxville, New York 10708  
Phone: 914-793-2083 / Fax: 914-793-2360 / www.BronxvilleMontessori.com

Programs Available: [please check one]

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

- |   |  |  |   |
|---|--|--|---|
| <b>3-6 Full Day</b>                         | <b>3-6 Half Day</b>                          | <b>Toddler Full Day</b>                      | <b>Toddler Half Day</b>                       |
| <input type="checkbox"/> 5 Full Days (M-F)  | <input type="checkbox"/> 5 Mornings (M-F)    | <input type="checkbox"/> 5 Full Days (M-F)   | <input type="checkbox"/> 5 Mornings (M-F)     |
| <input type="checkbox"/> 4 Full Days (M-Th) | <input type="checkbox"/> 5 AM + Th/F PM      | <input type="checkbox"/> 3 Full Days (M/T/W) | <input type="checkbox"/> 3 Mornings (M/T/W)   |
|   | <input type="checkbox"/> 5 AM + M/T/W PM     | <input type="checkbox"/> 2 Full Days (Th/F)  | <input type="checkbox"/> 2 Mornings (Th/F)    |
|   | <input type="checkbox"/> 5 Afternoons (M-F)  |  | <input type="checkbox"/> 5 Afternoons (M-F)   |
|   | <input type="checkbox"/> 4 Afternoons (M-Th) |  | <input type="checkbox"/> 3 Afternoons (M/T/W) |
|   |  |  | <input type="checkbox"/> 2 Afternoons (Th/F)  |

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ **\*\* All school communication is sent via email \*\***

Emergency Contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

Are parents separated or divorced? \_\_\_\_\_ Legal Guardian \_\_\_\_\_

Mother's Name	Father's Name
Cell Phone Number	Cell Phone Number
Occupation/Company Name	Occupation/Company Name
Company Address	Company Address
Work Phone Number	Work Phone Number

Other Children in Family: Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Pediatrician: \_\_\_\_\_ Doctor's Telephone: \_\_\_\_\_

Any known allergies? \_\_\_\_\_

How did you hear of our school? \_\_\_\_\_

**Admission Procedures:**

1. Application submitted with **non-refundable \$100.00 application fee.**
2. An intake interview is arranged after parental observation of our program.
3. A **non-refundable deposit** of 20% of the program fee is necessary to confirm a space.
4. When time permits, orientation visits for incoming students will be arranged.
5. All new children are accepted provisionally on a 3 week trial basis.

The Bronxville Montessori School is a nut free facility.

**I have read and understand the above admission procedures.**

Parents signature \_\_\_\_\_ Date \_\_\_\_\_

The Bronxville Montessori School admits students of all races, colors, religions, and national and ethnic origins.