



OFFICE USE ONLY	
APPLICATION STATUS	COMPLETE <input checked="" type="checkbox"/>
MISSING	<input type="checkbox"/>



SCHOOL ENROLLMENT FORM

2018-2019

Dear Parents,

We are happy to have you be part of the Lake Montessori family, a community of like-minded parents looking for the best education for their children in a happy and caring environment with wonderful teachers.

Our system of education sets up the children for future success by promoting independence in the classroom with hands-on learning instruments. The Montessori Method allows children to be happy and inspired while discovering the joy of learning.

Montessori schools are highly coveted worldwide and the children of Lake County are fortunate to have this school right next to historic downtown Leesburg. This is a school that focuses on children's overall education such as holistic values and outside the box thinking. We don't focus young children to the stress of standardized testing. No wonder why the highest ranked countries in education have adopted more hands-on-approach learning and holistic lessons rather than providing more work packets.

See, everything we do in this school is focused on the overall well-being of each individual child. We want to promote happiness, instill the love of learning and to prepare them for college and the real world. From selecting high-grade learning instruments and materials to teaching the children how to properly socialize with one another; everything is done to enhance the best academic and holistic education possible.

In an age of virtual communication, children must be taught how to properly talk to friends, how to apply self-respect and how to be proactive in challenging situations. Our circle time is intended to teach the holistic side of education such as allowing children to share how they feel about a particular lesson, practice effective public speaking, as well as mindful listening and good habits.

Unlike other schools that try to teach values and holistic learning by standing in front of the board, we model them. Just like in the real world and in college, our students don't have to raise their hands to go to the bathroom. Classrooms are composed of mixed aged children of various races, and religions and we coach the children how to deal with different types of people. What a wonderful way to prepare the children to interact and collaborate with various individuals, learn from older mentors and prepares them to lead by helping younger friends.

WELCOME TO THE LAKE MONTESSORI FAMILY,

*Mr. Hugo Jr.
School Principal*

Enclosed are the enrollment and Financial Agreement forms for the 2018 -2019 school year.

Please be sure to fill out the entire application.

- Student Information - Change of address, telephone numbers, emergency contacts, student pick up, medication, allergies etc.
- Financial Agreement - Please read very carefully and keep one copy for your records. Keep one Copy for your records.
- Medical Release - This form is mandatory for your child to attend field trips. The information you provide will be the only contact information we would have in case of an emergency while on a field trip. For this reason, the form must be completed every year.

OFFICE USE:

<input type="checkbox"/> Student Information - <input type="checkbox"/> Financial Agreement - <input type="checkbox"/> Medical Release	STAFFER: _____
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Forms should be returned to the school office. Siblings of presently enrolled students will be given priority. Please ask in the office for an enrollment package for new students.

Outstanding balances, other than upcoming tuition and Educare payments, must be cleared when re-enrolling. If specific arrangements are required to satisfy the balance, this must be done before the application can be processed.

If you need more information about any aspect of the school or need to make special arrangements for tuition payment, please contact the office immediately. We appreciate your prompt attention to re-enrollment. We are looking forward to having your children with us again next year.



ENROLLMENT APPLICATION 2018-2019

-CONFIDENTIAL- STUDENT'S INFORMATION

STUDENT'S NAME _____

GRADE ENTERING _____ DATE OF BIRTH _____ AGE _____

SEX: MALE _____ FEMALE _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____ HOME PHONE _____

SIBLING INFORMATION:

Name of Sibling _____ Age _____ Name of School _____

Name of Sibling _____ Age _____ Name of School _____

GUARDIAN #1 INFORMATION:

NAME (First, Last) _____

HOME ADDRESS _____ OCCUPATION _____

CITY/STATE/ZIP _____ EMPLOYER _____

HOME PHONE _____ E-MAIL ADDRESS _____

MOBILE PHONE _____ BUSINESS PHONE _____

BIRTHDATE _____

GUARDIAN #2 INFORMATION:

NAME (First, Last) _____

HOME ADDRESS _____ OCCUPATION _____

CITY/STATE/ZIP _____ EMPLOYER _____

HOME PHONE _____ E-MAIL ADDRESS _____

MOBILE PHONE _____ BUSINESS PHONE _____

BIRTHDATE _____

CONFIDENTIAL INFORMATION

1. Does your child need any special accommodations? (Please attach IEP or 504 plan(s) if child has previously received services) _____

2. Is the child entirely toilet trained? **YES NO**

3. How many hours of sleep does your child receive through the night? _____ hours

4. Do you try to limit your child's sugar intake by avoiding soda's and highly processed foods? **YES NO**

5. Do you try to limit your child's exposure to technology by one (1) hour before going to sleep? **YES NO**

6. Is your child in any special group activity, such as Sunday School, Scouts, or dance classes, in which she/he regularly participates. **YES NO**

7. How many times has the family moved in the child's lifetime? _____

8. Primary Language Spoken at home: _____

9. For the well-being and safety of the children, are there any legal custody arrangements we need to be aware of? **YES NO** If **YES**, please attach any documents pertaining to child custody

10. Previous schools attended:

SCHOOL NAME	CITY LOCATED AT	GRADE COMPLETED

8. How well you know about Montessori and the Montessori Method of Learning? Please circle 1 2 3 4 5

9. Has your child been referred to anyone for academic evaluation or special testing to diagnose a learning disability in the past? **YES NO**

10. Please note any additional information which you feel would be useful to us.

EMERGENCIES

Relative or friend to be notified in case of illness or emergency, in the event a parent cannot be reached.

1. NAME: _____ RELATIONSHIP TO STUDENT: _____
HOME PHONE: _____ WORK PHONE: _____
MOBILE PHONE: _____

2. NAME: _____ RELATIONSHIP TO STUDENT: _____
HOME PHONE: _____ WORK PHONE: _____
MOBILE PHONE: _____

PERSONS AUTHORIZED TO TAKE STUDENT FROM THE SCHOOL:

PHYSICIANS

STUDENT'S DOCTOR: _____ PHONE: _____

OFFICE ADDRESS: _____

STUDENT'S DENTIST: _____ PHONE: _____

OFFICE ADDRESS: _____

A birth certificate, current immunization record and proof of a physical must be on file in the office within one week of entry into the school.

List any medication the student is taking regularly: _____ None

- List any allergies: _____ None

- List any physical limitations that will prevent him/her from participating fully in school programs: _____ None

The Lake Montessori assumes the complete information concerning any allergies, physical limitations, and other medical directions or cautions will appear on the physical examination form completed by the doctor or will be detailed in a letter from the student's doctor.

Our Programs

MONTESSORI LEVELS

Named after history's most prime exemplar of the "Universal Genius" or "Renaissance Man", Leonardo Da Vinci was regarded by many historians and scholars as an individual of "unquenchable curiosity". Our Da Vinci program models the auto-didactic curiosity in children by implementing a hands-on multicultural curriculum promoting the sciences, arts and the Discovery method pedagogy. The Da Vinci Montessori approach promotes a fun and inspiring learning environment with highly trained teachers who teach lessons in a small student-teacher ratio. Students benefit by having a personalized curriculum, a healthy snack time, uninterrupted work cycle, botany and gardening classes, physical education, art appreciation and performing arts.



MIDDLE SCHOOL

A Hybrid between Montessori and traditional, with a small but intimate feel, the middle school settings combines technology programs, drama, research projects, Montessori Field trips and a caring environment. Changes in the body, new chemicals in the brain, and the pressures of society can weigh heavily on adolescents who range from 11-13 years old. However, at Lake Montessori, we understand this tension and we embrace every stage that our students move through. We know that all stages of your child's life are important and valuable for learning, growing, and developing into who they are meant to be. The middle school years should never be written off or diminished, and our policy is that these years are critical for transitioning into high school.



FINANCIAL AGREEMENT

TUITION AND FEES 2018 -2019

A good quality education is not cheap and it has many overhead charges. That is why want our parents to be aware that tuition is based on a full year's enrollment. All payments apply to the entire year's tuition. The advance is not a deposit, but a pre-payment in addition to your monthly payments. **Phasing-in, short months, vacations and absences do not affect tuition payments. Each student has an annual \$250 material fee due at the beginning of the school year and an additional \$50 Fee for FACTS.com¹.**

<u>AGE PROGRAMS</u>	<u>PRICE</u>	<u>TOTAL YEAR TUITION</u>
Toddlers Ages 3 &4	\$500 10 Months	\$6,000
Montessori Da Vinci (Age 5 and above)	\$630 12 Months (June 1st 2018- May 31st 2019)	\$7,560
Summer Camp 2017	Included*	\$1,440
Monthly Tuition Payment Amount ²		_____

Terms of Tuition

The terms of tuition payment are as follows: The **NON-REFUNDABLE** material fee is due by the end of the first week of school. Enrollment of your child obligates you to a total full year's tuition. A mid-year withdrawal still obligates you to a full year's tuition unless a released is signed by a School Official. Enrollment from the beginning of the academic year (August) on will be calculated from a 10-month academic year. You must agree with our description of services and merchandise agreement to enroll in our school. Any outstanding balance must be cleared before the beginning of school. Summer Camp 2018 is included for parents with children ages 5 and up. You must agree to the annual contract totaling \$7,560 before the last day of classes of the 2017-2018 school year.

ONE-TIME REGISTRATION FEE FOR NEW FAMILIES: For families that are new to Lake Montessori, there is a one-time registration fee of \$100 that is due with the advance payment upon acceptance of your child. The fee applies per family, so if a family registers multiple children, the fee remains only \$100. Returning families do not pay this registration fee. **EDUCARE (before and after care) CHARGES:** For your convenience, fees for Educare are assessed separately from the Montessori school tuition and are based on the hours the child attends the program. The charge is \$5.50 per hour. **The minimum charge within the first hour is \$5.50, and charges are assessed on an hourly basis.** You may drop your child off at Educare as early as 7:00 a.m. There is no charge between 8:00 a.m. and when your child begins class. However, you will be charged at the regular Educare rate if your child arrives before 8:00 a.m. For example, a child dropped off at 8:05 will have no charge, while one dropped off at 7:55 will have a \$5.50 charge.

If your child is not picked up from his Montessori class within ten minutes of class dismissal, they will be placed in Educare until you arrive at the regular Educare rate. Educare charges begin at 3:30 pm at \$5.50 per hour. Special consideration may be made for siblings with different dismissal times. If you are in this situation, please contact the office. The closing time for Educare is 6:00 p.m. **Educare closes at 6:00 pm. Parents who arrive late will be charged \$1 per minute until the child has been picked up.** **ALL ACCOUNTS MUST BE IN GOOD STANDING TO USE EDUCARE.** This Agreement explains how your account will work and explains the terms that both you and we agree to follow this account. The words "we", "us" and "our" means Lake Montessori School and "you and 'your" mean everyone who signs this Agreement or who is liable for payment on this account. By your use of this account, you agree to the terms of this Agreement. **PROMISE TO PAY:** You are responsible to pay in U.S. dollars the standard full tuition amount for each corresponding age group your child is at the

¹ Fee is subject to change to FACTS

² (MPTA)After discounts including siblings, scholarship or other. Regular tuition only, this does not EDUCARE, lunch balances or any other Merchandise or miscellaneous charges.

beginning of the academic year. You promise to pay the monthly payment amount at the beginning of each month, no later than the first 10 days. You may pay the New Balance shown on your Billing Statement each month. If you do not pay the New Balance in full, you agree to pay by the payment due date at least the minimum due. Your payment will be used first to pay the material/supply fee then pay the remaining tuition balance. **MINIMUM PAYMENT:** Your minimum payment each month will be 50% of the monthly payments for up to two months with a minimum of \$110 per student. Added to the minimum payment will be any portion of the prior month's minimum payment not paid, late charges and charges for items returned for non-sufficient funds. If you can't meet payment we have the right to terminate your child from our school. **BILLING RIGHTS SUMMARY:** In case of Errors or questions about your bill- if you think your bill is wrong, or if you need more information about a transaction your bill, please submit a written statement to the office so we can look at your account. **OUR RIGHTS:** We reserve the right to change our form of collection and payment communication including but not limited to working with a third party financial company. We also hold the right to charge a transaction fee at our discretion.

FINANCIAL AGREEMENT

I/We have read, understand, and agree to the above terms for Lake Montessori annual tuition, material fee, Educare charges, and withdrawal notices.

Parent Signature _____

Date: _____

Parent Signature _____

Date: _____

Social Security Number and Name (PARENT): _____

**** By signing, you agree to all financial terms listed above. Please keep a copy for your records.**

NONDISCRIMINATORY POLICY

The Lake Montessori admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities accorded or made available to students of the school. It does not discriminate by race, color, national, and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs

ADMISSION POLICY

Each student who enrolls at Lake Montessori School is encouraged to succeed. We carefully evaluate the child's development and ability to blend into an everyday learning environment. The child's teacher and Administrator reserve the right to meet with the parent(s) / guardian(s) to discuss the progress of his or her child. We often find most children will seamlessly adapt to their new surroundings. If, however, we face a scenario in which a child encounters difficulty, we will work diligently with the parents(s)/ guardian(s) to reach a solution that best supports the child's transition. In the unfortunate event that this cannot be reached, enrollment may be terminated.

10. A conference may be required with any applicant.

11. All accepted transfer students are placed on provisional status.

Parent/Guardian Signed: _____ Date: _____

School Official: _____

ENROLLMENT & PERMISSION FORM

I am enrolling my child _____, for the 2018 -2019 school year at Lake Montessori:

- I am including \$250 material/supply fee.
- I am including \$50 FACTS membership.
- I am including \$100 new family fee.
- I am including my child's **current** Physical and current Immunization Record.
- I am including my child's Birth Certificate (only new students must provide).
- I am including my child's Physical (current students provide updates only).
- My child has received prior schooling, and I am including or have signed a Records Release Form.
- Photographs of my child may be used in any school advertisement or publication, (website, Facebook, newspapers, magazines, postcards, television, school photos, etc.).
- I agree to come to two (2) education nights. Otherwise I consent to pay a \$50 fee per education night missed.

PARENT/GUARDIAN: _____ DATE: _____

- My child has permission to go on short field trips to locations within walking distance of the school, accompanied by a staff member. Your permission is required if your child will be staying in Educare.

PARENT/GUARDIAN: _____ DATE: _____

VOLUNTEER & EDUCATION NIGHT COMMITMENTS

Volunteering at the school is a great way to be involved in your child's world. Your involvement at the school creates relationships with the adults and children who know your child and let you become more intimate with the programs and values the school fosters.

In order to ensure the safety of the children, we require all volunteer parents to have a level two background screening. Please contact the office for more information.

The following is a list of areas where we like to encourage parents to participate. Many activities can be tailored to suit your schedule and time capabilities. Please mark any area that interests you. If your interests are not on our list, please list them in the space marked 'other.'

- Gardening
- Books - preparing new books/repairing damaged books
- Materials - cutting paper/making copies/organizing
- In class work (Foreign Language, Reading, Recess, Lunch distribution, Art, Drama)
- Special school-wide projects (floats, parades, sets, etc.)
- Lend-A-Hand
- Field trips Other _____



Media and Photo Release



I, _____ (print name), parent/guardian of _____ (child's name), hereby grant permission to Lake Montessori Camp, employees or representatives, to take and use for photographs and digital images, videotape, audio recording or quoted remarks of my child for use in promotional or educational materials such as printed publications or materials, electronic presentations and websites pertaining to the camp.

I agree that my child's name and identity may be revealed in descriptive text or commentary in connection to the image(s).

I authorize the use of these materials indefinitely without compensation to me. All negatives, positives, print reproductions and video/audio recording belong to Lake Montessori School.

Signature of Parent/Guardian

Date

MEDICAL RELEASE

Student's Name: _____ Date: _____

A representative of Lake Montessori is hereby authorized to give consent to and employ, on my behalf, a licensed physician (M.D.) for medical treatment of my son/daughter in connection with any injury, accident, illness, or disease he or she may suffer or sustain while in their charge during the 2018-2019 school year and to obtain hospitalization if recommended by said physician.

Student's local physician: _____

Phone: _____

Medical Insurance: _____

Policy # _____

Parent or Guardian (Print): _____

Parent or Guardian Signature: _____

Address: _____

Home Phone: _____ Work Phone: _____

Emergency Phone Number: _____

Notary: _____
State: _____
County: _____

The foregoing instrument was acknowledged before me this by _____ who is personally known to me or who has produced _____ as identification and who did take an oath.

***** Please indicate any health concerns such as allergies, diet, medicines allowed to take etc., below. *****

