

AVALON CHILDREN'S MONTESSORI SCHOOL STUDENT APPLICATION

Applying for School Year: _____ Level: Casa – 2 ½ - 6 yrs Elementary grade _____ Learning Support Program

CASA APPLICANTS only: 5 full days 3 full days (*circle days*) M T W Th F ½ days – AM or PM
(not available for 3rd year Casa students)

Child's Full Name: _____ Date of Birth (M/D/Y): _____

Complete Address: _____ Gender: M F

Home Phone: _____

Day care or school your child presently attends: _____

Address: _____ Number of Years: _____ Current Grade Level: _____

Parent/Guardian: _____

Home Address: same as above

Contact Numbers: Home: _____ Cell: _____

Email: _____

Parent/Guardian: _____

Home Address: same as above

Contact Numbers: Home: _____ Cell: _____

Email: _____

How did you hear about us? _____

Have you observed a class yet? Y N If yes, when and which location? _____

CASA APPLICANTS: Please indicate if you have a location preference: 31 Wood Glen Rd. 65 Glen Manor Dr.

ELEMENTARY APPLICANTS: Please include: ● Birth Certificate ● Final reports of last school year ● Most recent Report Card

*Once your completed application has been received, you will be contacted to arrange the next step.
Please note that space is limited and your child may be placed on a waiting list.*

Avalon Children's Montessori School does not discriminate on the basis of race, sexual orientation, creed, colour, or national origin in its admission procedures or educational policies. The Directors reserve the right to ask for the removal of any student or family who fails to adhere to the Code of Conduct. By signing this Application, the parent/guardian agrees to pay all fees and disbursements upon the student's enrolment. Both parents/guardians MUST sign below.

In accordance with Canada's new anti-spam legislation, effective July 1, 2014, please indicate if we have your permission to contact you via email regarding updates at Avalon. Yes No

Signature: _____ Signature: _____

Date: _____ Date Rec'd at Avalon: _____