



# Pine Lake Montessori School Inc.

## Application for Admission

### 2021 – 2022 School Year

Children 18 months to 9 years - All information contained in this form is confidential

### Preferred Program:

Lower Elementary (6 years old to 9 years old):                      Grade 1                       Grade 2                       Grade 3

Children's House (30 months to 6 years old)                     

Toddler Program (18 months to 36 months old)                     

### Extended care required:

AM Care (7:00-8:00 a.m.)                      Yes:                       No:                       Approximate Drop-Off Time: \_\_\_\_\_

PM Care (5:00-6:00 p.m.)                      Yes:                       No:                       Approximate Pick-Up Time: \_\_\_\_\_

### Student's Personal Information:

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Gender: Female / Male

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Telephone #: ( ) \_\_\_\_\_ Birth Date: \_\_\_\_\_ Birth Certificate copied: \_\_\_\_\_ Immunization Record copied: \_\_\_\_\_

### Parent/Guardian's Information:

Mother's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Employer: \_\_\_\_\_ Bus. Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Email: \_\_\_\_\_

Father's Employer: \_\_\_\_\_ Bus. Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Marital Status:                      Married: \_\_\_\_\_                      Divorced: \_\_\_\_\_                      Separated: \_\_\_\_\_

Applicants lives with:                      Both Parents: \_\_\_\_\_                      Mother: \_\_\_\_\_                      Father: \_\_\_\_\_                      Other: \_\_\_\_\_

Custody Concerns:                      Legal documentation attached: \_\_\_\_\_                      Who has legal custody (joint/mother/father)?: \_\_\_\_\_

Correspondence to be sent to:                      Parents: \_\_\_\_\_                      Mother only: \_\_\_\_\_                      Father only: \_\_\_\_\_                      Other: \_\_\_\_\_

Sibling's Name(s): \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_

Sibling's Name(s): \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_

## Student's Medical Information:

Family Doctor's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Immunization Attached: Yes: \_\_\_\_ No: \_\_\_\_ Reason, if no: \_\_\_\_\_

Allergies (food, medication, environmental, Etc.): \_\_\_\_\_

Are above-mentioned allergies "LIFE THREATENING": \_\_\_\_\_

Does your child have any Special dietary requirement?: \_\_\_\_\_

History of communicable diseases or ill-health record: \_\_\_\_\_

Any particular physical activity that child should not participate: \_\_\_\_\_

## Does Your Child Have?

A condition or behavior that would require special attention or diet: \_\_\_\_\_

A social or emotional condition: \_\_\_\_\_

Any special medical or additional information: \_\_\_\_\_

## Emergency Contacts (other than parents):

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Home #: \_\_\_\_\_ Business #: \_\_\_\_\_ Cell #: \_\_\_\_\_

2. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Home #: \_\_\_\_\_ Business #: \_\_\_\_\_ Cell #: \_\_\_\_\_

3. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Home #: \_\_\_\_\_ Business #: \_\_\_\_\_ Cell #: \_\_\_\_\_

## People to Whom Child May be Released *(Please provide picture of those permitted to pick up, picture I.D. is required for pick up):*

1. Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_ Home #: \_\_\_\_\_ B/C#: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_ Home #: \_\_\_\_\_ B/C#: \_\_\_\_\_

## TERMS OF PAYMENT:

- Enrollment is for the entire school year from start date to June 24<sup>th</sup>, 2022.
- The Deposit (One month's payment) and Registration Fee (\$250.00) are non-refundable and non-transferable.**
- The Deposit, Registration Fee, and Elementary Educational Books & Materials fee** must be submitted along with the signed enrollment contract.
- The Deposit guarantees your child's spot at PLMS for the 2021-2022 academic year. The Deposit covers the month of June tuition payment, only if the child attends for the whole school year. However, if the contract is cancelled prior to the end date of the school year the deposit is non-refundable and non-transferable and will not be applied as tuition fee for your child's last month of attendance.
- The tuition must be paid promptly according to the fee schedule on the first business day of each month.
- In addition, I/We, undersigned, shall pay all amounts incurred by or on behalf of the students for field trips, extra-curricular activities, resource and remedial tutoring, and the cost of any transportation provided by or through PLMS to the students to or from the school.
- PLMS only accepts personal cheques and Interac e-Transfers as method of payment for Deposit Payment, Registration fee (New students only) and Elementary Educational Books.
- PLMS only accepts the Pre-authorized Payment plan as a method of payment for monthly fee.
- Non-payment of any amount owing to PLMS will be subject to the payment of interest at the rate of one and one-half percent (1.5%) per month (18% per annum).
- Late pick-ups (after 6pm) will be charged \$1.00 per minute per child, payable upon pick up to the faculty member in charge.
- Drop-offs before 8:00 am and Pick-ups after 5:00 p.m. when school is informed in advance are subject to extended care charges of \$15 per ½ hour or part. Any late pick up or early drop off without notification is subject to \$1.00/minute charge. The amount is payable to Pine Lake Montessori School through Interac e-Transfer.
- Any NSF cheque will be subject to a \$75.00 service charge.** Should a cheque or a payment be returned for non-sufficient funds or any other titled charged back item, the replacement payment must be paid by Interac e-Transfer in the amount of the original payment plus a **\$75 service charge within a week. Where the appropriate replacement payment is not provided**, Pine Lake Montessori Inc. reserves the right, which is not subject to challenge, in its sole and unfettered discretion, to request the immediate withdrawal of the child.
- Official Tuition/Childcare tax receipts will be issued prior to February 28<sup>th</sup> of 2022.

## TERMS OF ADMISSION:

1. It is recognized that the Montessori method of education encourages a three-year cycle for Children's House. Children's House accommodates children between the ages of 30 months to 6 years of age. It should be understood that the three-year cycle is necessary for a child to achieve the maximum benefits of the program.
2. **Children starting Children's House program must be toilet trained.** This means that your child is capable of recognizing when he/she must use the toilet and understand how to independently clean himself/herself. It is not a requirement for Toddler students to be toilet trained upon starting at PLMS.
3. It is recommended that a child to be no older than 4 years of age upon enrollment and should attend at least one year of the full day program in efforts to obtain maximum benefit of the program.
4. **Welfare and Safety:** The welfare and safety of your child is of the utmost importance and while he/she is in the care of the school all-foreseeable precautions will be taken. However, PLMS cannot assume responsibility for your child beyond that which would be expected of a reasonable parent. Parents are responsible for making sure that their child/ren enters the class upon their arrival at the school.
5. **Meal Plan:** All full day students receive catered meals regardless of the chosen schedule.
6. **Rules and Regulations:** Pine Lake Montessori School Inc. reserves the right to amend the rules and regulations in the operation of the school, as it feels appropriate, and it is a condition of the attendance that these rules and regulations are adhered to.
7. **Cancellation Policy:** Should the occasion arise that you wish to withdraw your child without penalty you must ensure that a **minimum of 60 days notice** from the first day of the withdrawing month is submitted **in writing** to the office, otherwise **2 full months of tuition will be withheld.** Despite the 60 Day Notice withdrawal, the Registration Fee and the Deposit are non-refundable and non-transferable. This policy will be strictly adhered to.
8. **Temporary withdrawal** of the child will result in a loss of permanent space in the classroom and hence the application form will be placed on a waiting list.
9. **Photo/Video:** I give permission to Pine Lake Montessori School Inc. or those acting on its consented behalf to take pictures/video for school purposes, including but not limited to advertising in digital/print or newspaper articles/other social media, which may include my child. **In the event that I no longer wish to provide this permission, I will advise the school in writing.** PLMS has the option of using pictures/video throughout while operating as a school.
10. **Discipline:** PLMS has the right to withdraw a child from the school should the Principal/Head of School feel that the Montessori Pedagogy and staff of PLMS are not able to provide what is necessary for the needs of the specific child.
11. **Email Release:** The undersigned further agree that my/our email account can be provided to classroom parent representative for communication related to PLMS information, events and volunteer opportunities. The undersigned agree that I/We wish to receive electronic messages from PLMS, which relate to PLMS matters.
12. **Required Documents:** I understand that the Application form, a copy of the child's most recent immunization record, child's birth certificate, Deposit fee (One Month fee), Registration fee, Elementary Educational books & materials fee, Pre-Authorized Payment Form and a "Void" cheque must be submitted upon registration. If any item/information is missing, the application form will be placed on "hold" until received.
13. **Emergency Authority, release and Indemnification:** I, the undersigned, agree that in the event I cannot be reached at the time of illness or accident, or if the emergency is such that the time does not permit such contact, Pine Lake Montessori School is authorized to secure proper treatment, order injections, or provide any treatment, prescribed by the physician caring for my child, as well as arrange transportation to the emergency department of the nearest hospital with no liability on the part of the driver or of Pine Lake Montessori School and its agent and employees. I hold Pine Lake Montessori School, its agents and employees harmless from any and all claims, damages, liabilities or injuries to my child that are not the result of negligence of the school, its agents or employees, or are entirely beyond the control of this school, its agents or employees.
14. **The enrollment policy is as follows:** Current students returning for another year and their siblings have priority over new applicants until February 15, 2021. If the application and deposit are not received by this date, applications will be processed from the waiting list. You forfeit any guarantee of placement.

The signing of the Enrolment/ Re-enrolment form is an acknowledgment of acceptance of the terms and conditions set here and on the Terms of Admission, Terms of Payment, and the fee schedule.

**I/WE PARENT OF \_\_\_\_\_ HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE TERMS AND PROVISIONS OF THE ENROLMENT/RE-ENROLMENT INFORMATION, SCHEDULE OF FEES, EMERGENCY AUTHORITY AND THE RELEASE OF /INDEMNITY AGREEMENT:**

The undersigned parents or guardians have executed this Parental/Guardian Agreement, this \_\_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_ at Toronto, Ontario.

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

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

Parent/Guardian Name (Please Print): \_\_\_\_\_

Parent/Guardian Name (Please Print): \_\_\_\_\_

**Thank you for partnering with Pine Lake Montessori School in your child's education**

### **Office Use Only**

Start Date: _____	Yes: ___	No: ___	Amount: \$ _____
Elementary Educational books & materials fee received	Yes: ___	No: ___	Amount: \$ _____
Registration fee received:	Yes: ___	No: ___	Amount: \$ _____
Deposit received:	Yes: ___	No: ___	Amount: \$ _____
Pre-Authorization Payment Form:	Yes: ___	No: ___	Amount: \$ _____
"Void" Cheque received:	Yes: ___	No: ___	
Picture:	Yes: ___	No: ___	
Copy of Immunization Record:	Yes: ___	No: ___	
Proof of Birth Date:	Yes: ___	No: ___	
Date Student Withdrew: _____	<b>Signature of Administrator:</b> _____		