



The Children's Cooperative Montessori School

268 Fairmont Ave, Hyde Park, MA 02136

Summer Registration

Registration Date: _____

Deposit _____

Child's Name: _____ Date of Birth: _____

Preferred Name: _____ Boy ____ Girl ____

Present Address: _____ Home Phone: _____

Parent/ Guardian: _____ Relationship: _____

Home Phone: _____ Mobile Phone: _____ Work Phone: _____

Email Address: _____

Sessions

Please indicate specific sessions you want your child to attend:

I. **Urban Oasis** June 18 - June 22

June 25 - June 29

II. **Paper Art** July 2 - July 6

July 9th - July 13th

III. **Life in the Desert** July 16 - July 20

July 23 - July 27

IV. **Art & Culture of Japan** July 30 - August 3

August 6 - August 10

Times

_____ 5 Mornings 8:30 am - 12:30

_____ 5 Days 8:30am - 3:00pm

(over please)



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Registration Agreement

Registration Policies

- ❖ I/We understand that if a session isn't fully enrolled The School has right to cancel the session.
- ❖ I/We understand and accept The School's policies regarding fee, tuition and terms of enrollment.
- ❖ I/We agree to pay the balance of program fees by June 10th

Releases

- ❖ I/We do hereby give permission for my/our child to participate in all planned summer activities.
- ❖ I/We authorize The Children's Cooperative Montessori School to have, use, publish and reproduce photographs or videos of my child in brochures, on our website or for any publication.
- ❖ I/We authorize The School to release my child's address and telephone number to other camp families.

Health

- ❖ I/We understand that no child will be registered unless a signed health history form is on file with the school.
- ❖ I/We understand that The Children's Cooperative Montessori school requires each student to have a physical examination and immunization history provided by a physician within 12 months of attending the summer session and that this must be on file prior to beginning the session.

Dismissals

- ❖ I/We understand the Director reserves the right to dismiss a student when in his/her judgment the student's behavior interferes with the rights of others, the smooth functioning of the group or activity, or violates the school's principles of conduct. In such case no refunds will be given.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date