

2020-2021

Virtual Academy Enrollment Application

Please fill in application completely and legibly

Child's Name _____ , _____ , _____
(Last Name) (First Name) (Initial)

Child's Address _____
(Street) (City) (State) (Zip)

Phone# _____

Date of Birth/Age _____ Sex M F Grade _____
(Check One)

1st Enrolling Parent/Guardian _____ , _____ , _____
(Last Name) (First Name) (Initial)

Relationship to Child _____ Driver's License# _____

E-mail Address _____

Home Phone# _____ Cell Phone# _____

Employer _____

Work Phone# _____ Extension# _____

2nd Enrolling Parent/Guardian _____ , _____ , _____
(Last Name) (First Name) (Initial)

Relationship to Child _____ Driver's License# _____

Home Address _____
(Street) (City) (State) (Zip)

E-mail Address _____

Home Phone# _____ Cell Phone# _____

Employer _____

Work Phone# _____ Extension# _____

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Parents Marital Status Single

(Check One)

Child's Primary Residence Both Mother Father Guardian

(Check One)

If Divorced, who has legal custody? _____

May the non-custodial parent pick-up the child? Yes NO

(Check One)

Enrolling Parent/Guardian Signature _____ Date _____

The building will be open from 7:00 AM to 5:30 PM

- I agree to pay in advance each bi-weekly or monthly tuition.
- I am aware that I will be charged a fee for payments received after Tuesday.
- I am aware that I will be charged a fee for late pick-ups.

Return Check Policy

In the event that your check is returned un-paid, For Kids' Sake Montessori will make no additional attempts to submit check for payment. A \$35 fee will be charged for the initial collection attempt. The parent/guardian is responsible for the principal amount plus the collection fee with all outstanding funds due immediately. **After two returned checks, all future tuition must be paid in cash.**

Parent/Guardian (Payee) _____

Enrolling Parent/Guardian Signature_____
Date