

**WAITLIST FORM FOR RIVER EAST MONTESSORI PRESCHOOL**

Date: \_\_\_\_\_ Referred by : \_\_\_\_\_ Child  
Information First Name: \_\_\_\_\_ Last  
Name: \_\_\_\_\_ Birth  
Date: \_\_\_\_\_ Child's Gender: Male/ Female  
Address: \_\_\_\_\_ Apt./Suite  
No.: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_  
PostalCode: \_\_\_\_\_ Home Phone : \_\_\_\_\_  
Email: \_\_\_\_\_ Parent/Guardian Information  
Mother's Name: \_\_\_\_\_  
Father'sName: \_\_\_\_\_ Home Phone #  
: \_\_\_\_\_ Home Phone # : \_\_\_\_\_ Bus.  
Phone # : \_\_\_\_\_ Bus. Phone #  
: \_\_\_\_\_  
Email: \_\_\_\_\_ Email:  
\_\_\_\_\_ Desired Enrollment Date:

**Days of Interest (circle all that apply):**

**Program**

- 5 Full Days (8:30 am - 4:30 pm) 4 Full Days (8:30 am - 4:30 pm)
- 3 Full Days (8:30 am - 4:30 pm) 2 Full Days (8:30 am - 4:30 pm)
- 5 Half Days (8:30 am -12:00 noon) 5 Half Days (1:00 pm - 4:30 pm)
- Morning Extended Care (7:30 am – 8:30 am) Afternoon Extended Care (4:30 pm - 5:30 pm)
- Lunch Program (12:00 - 1:00 pm)

\* All fees are based on a monthly basis - September to June.  
\* ADDITIONAL FEE - REGISTRATION FEE (PAYABLE AT TIME OF ENROLLMENT)  
\$100 (PLEASE NOTE THAT IT IS NOT REFUNDABLE)  
(Ages 2-6YEARS )

Does your child attend school? Which one?

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