



# COCONUT GROVE MONTESSORI SCHOOL SUMMER CAMP 2011 ENROLLMENT APPLICATION

<b>Half Day (8:30-11:30)</b> _____ <b>Full Day (8:30-2:30)</b> _____ <b>Aftercare (2:30-4:00)</b> _____ (Magic Science Camp only)	<b>Magic Science Camp</b> _____ <b>Toddler Camp</b> _____	<b>Week 1 (June 27-July 1)</b> _____ <b>Week 3 (July 11-July 15)</b> _____ <b>Week 5 (July 25-July 29)</b> _____	<b>Week 2 (July 4-July 8)</b> _____ <b>Week 4 (July 18-July 22)</b> _____ <b>Week 6 (Aug. 1-Aug. 5)</b> _____
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NAME OF CHILD: \_\_\_\_\_ SOC. SEC. NUMBER \_\_\_\_\_

SEX: \_\_\_\_\_ PRESENT AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

GENERAL HEALTH OF CHILD: \_\_\_\_\_ ALLERGIES: \_\_\_\_\_ FEARS: \_\_\_\_\_

ANY SERIOUS ILLNESS OR ACCIDENT: \_\_\_\_\_

PEDIATRICIAN: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

PREVIOUS SCHOOLING? \_\_\_\_\_ WHERE? \_\_\_\_\_

IS CHILD CARED FOR BY ANYONE OTHER THAN HIS/HER PARENTS? \_\_\_\_\_ IF YES, BY WHOM? \_\_\_\_\_

ANY BACKGROUND INFORMATION THAT WOULD BE USEFUL TO CHILD'S SCHOOL? \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ BUSINESS ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_ CITY, STATE & ZIP: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

CELLULAR: \_\_\_\_\_ CELLULAR: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

ARE PARENTS SEPARATED OR DIVORCED? \_\_\_\_\_ CUSTODY: BOTH: \_\_\_\_\_ MOTHER: \_\_\_\_\_ FATHER: \_\_\_\_\_

HOW DID YOU HEAR ABOUT OUR SCHOOL? \_\_\_\_\_

PERSON TO BE NOTIFIED IF PARENTS CAN NOT BE REACHED:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

PERMITTED TO REMOVE CHILD FROM SCHOOL: MOTHER: YES \_\_\_ NO \_\_\_ FATHER: YES \_\_\_ NO \_\_\_

OTHER PERSON ALLOWED TO REMOVE CHILD FROM SCHOOL:

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PARENTS' SIGNATURES: MOTHER \_\_\_\_\_ DATE \_\_\_\_\_

FATHER \_\_\_\_\_ DATE \_\_\_\_\_