



CATHEDRAL MONTESSORI SCHOOL

2019-2020

Cathedral Montessori School

Primary (Ages 3-6) Application for Admission

9 Fortress Road / New Orleans, LA 70122 / Tel 504.252.4871 / cathedralmontessori@gmail.com

Please Print Clearly

Photo of Applicant
(Optional)

Applicant Information:

Last: _____ First: _____

Middle: _____ Preferred Name: _____

Gender: Female Male

Date of Birth: _____

Child MUST be 3 years old by September 30, 2018.

Previous School Experience: _____

May we contact the above school(s) for official assessments and records? Yes No

Current Member of Holy Trinity Greek Orthodox Cathedral? Yes No

I would like to enroll my child in: (check one program)

Half Day: (\$5,500/yr)
(8:30 am-11:30 am)

Full Day: (\$7,550/yr)
(8:30 am-2:30 pm)

Extended Day: Available 7:30-8:30 am and 2:30-5:30 pm
*\$6.50/hour or contracted monthly at the following discounted rates:

- 1 hour/day (\$95/month)
- 2 hours/day (\$180/month)
- 3 hours/day (\$270/month)
- 4+ hours/day (\$350/month)

How did you hear about Cathedral Montessori School?

- Referred by: _____
- Internet Search
- Advertisement
- Other: _____

Application Fee: \$50.00 non-refundable

Cathedral Montessori School does not discriminate on the basis of race, color, national or ethnic origin, gender or handicap in administration of its educational policies, admission policies financial assistance programs or other administered programs.

Family Information:

Child lives with: Both Parents Mother Father Other

Names and ages of siblings: _____

Mother or Guardian:

Last: _____ First: _____

Address:

Street: _____ Suite/Apt#: _____

City: _____ State: _____ Zip: _____

Occupation: _____ Employer: _____

Work Phone: _____ Cell: _____

Email: _____

Father or Guardian:

Last: _____ First: _____

Address:

Street: _____ Suite/Apt#: _____

City: _____ State: _____ Zip: _____

Occupation: _____ Employer: _____

Work Phone: _____ Cell: _____

Email: _____

Mother/Guardian (Print Name): _____

Signature: _____ Date: _____

Father/Guardian (Print Name): _____

Signature: _____ Date: _____

For Office Use Only

Date of Application: _____

Admissions Visit Date: _____ Tour Date: _____

- Application Fee
- Enrollment Contract
- Medical Information
- Immunization

- Master Card
- Child History
- Tuition Deposit
- Non-Vehicular Excursion

Remarks: _____