



VERNON HILLS MONTESSORI ACADEMY

21 W Hawthorn Pkwy Vernon Hills IL 60061 Phone: 847-918-0342

Email: montessorimusicacademy@gmail.com

TRANSITION CLASS SUMMER PROGRAM 2021

Please complete this form and return it with the appropriate fees. You can email or drop it off at the school.

I _____ (name of the parent/parents) agree to pay the total summer tuition fee in full or in 2 installments. I understand that the tuition fee term is not subject to adjustment because of illness, absence, withdrawal, or dismissal of the child from the Summer Program for any cause after the date of admission. Make checks payable to "V H Montessori". The following information is submitted as part of this application for my child.

New Student

Returning Student

Name of Camper _____ Phone # () _____

Home Address _____ City, State _____ Zip _____

Date of Birth _____ Sex _____ Place of Birth _____

Email _____ Child's T-Shirt Size XS S M L

Name of Parent (Or person enrolling the camper) _____

Relationship to child _____ Phone # () _____

Cell Phone () _____ Check if you want TEXT REMINDERS

How did you hear about us? _____

LIST 2 EMERGENCY CONTACTS IF WE CAN'T REACH PARENTS:

Name 1 _____ Phone # _____

Address _____ City, State _____ Zip _____

Name 1 _____ Phone # _____

Address _____ City, State _____ Zip _____

Name of Physician to call if the child becomes ill or injured (Besides people listed above) _____

Address: _____ Phone : _____

Registration: \$100

Payment Plan: deposit \$250 due-on the day of registration, 1st installment due -June 1,2021, 2nd installment due - July 1,2021.

If enrolled 7 or fewer weeks, due is on June 1 in full.

Extracurricular classes are not included, Extracurricular class information will be provided as soon as we know.

TODDLERS 15-35 months FULL DAY ONLY 8:30 AM-5:30 PM	TRANSITION 2,5-4 YEARS FULL DAY 7:00 AM – 6:00 PM	TRANSITION 2,5-3,5 YEARS HALF DAY 8:30 AM-11:30 AM
5 Days a Week \$305 per week	5 Days a Week \$290 per week	5 Days a Week \$220 per week
4 Days a Week \$270 per week	4 Days a Week \$260 per week	4 Days a Week \$180 per week
3 Days a week \$220 per week	3 Days a Week \$245 per week	3 Days a Week \$150 per week

Please check the days and program your child will be attending

		MON	TUE	WED	THUR	FRI
Full Day – LUNCH INCLUDED	7:00am - 6:00pm					
Half Day – NO LUNCH	8:30am - 11:30am					
Half Day – LUNCH INCLUDED/\$7/day	8:30am - 1:00pm					

ATTENDANCE SCHEDULE (Please check the days and camp(s) your child will be attending

- June 7-11th (on site) June 14-18th June 21-25th June 28-July 2nd July 5-9th July 12-16th July 19-23th July 26-July 30th
- August 2- August 6th August 9- August 13th August 16- August 20th

Parent Signature: _____ VHMA _____ Date: _____

Registration Fee _____ Deposit _____ June 1st _____ July 1st _____ Aug. 1st _____ Total _____

Check# _____ Credit card# _____ Exp _____ CVV code _____ Zip Code _____