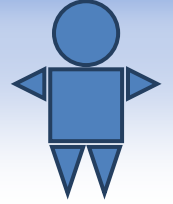


Bermuda Montessori School



"Preparation for Life"

APPLICATION FORM

Name _____
First Name Last Name

Date Of Birth _____ Male / Female
Day / Month / Year

Mother's Name _____

Home Address _____

Home Telephone _____ Work Telephone _____

Cellular Phone _____ Email Address _____

Father's Name _____ Tick if same address

Home Address _____

Home Telephone _____ Work Telephone _____

Cellular Phone _____ Email Address _____

Academic Year Applying For _____

Half Day Full Day Full Day & After School Care (Tick one please)
(8AM - 12PM) (8AM - 4 PM) (8 AM - 5:30 PM)

Parent Signature _____ Date _____

\$25 APPLICATION FEE (Please do not send cash through the mail!)

CASH CHEQUE ONLINE

ONLINE BANKING - BANK OF BUTTERFIELD 20-006-060-238-545-100

THIS FEE DOES NOT SECURE PLACEMENT OF ANY CHILD INTO THE BERMUDA MONTESSORI SCHOOL

23 Rosemont Avenue, Hamilton, Pembroke Parish HM 08
T: 292-7209 | F: 238-3140 | E: bermudamontessori@northrock.bm