CORONATION MONTESSORI PRESCHOOL IN GLENMORE



422 Ballou Place, Kelowna B.C. V1V 1V4. 778-484-3121 coronationmontessoripreschool@gmail.com coronationmontessoripreschool.ca

CLASSES & FEE SCHEDULE 2025/2026 Date:

PLEASE PRINT CLEARLY

CHILD'S FIRST & LAST NAME: CHILD'S D.O.B. M/D/YR. AGE:

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MORNING CLASSES- 3 DAYS - TUES. WED. THUR. 3 HRS./ 9:00 AM TO 12:00 PM YEARLY TUITION for the Morning Class of 3 days per week = \$3500.00

Your child's tuition is Tax Deductible. A tax receipt will be issued in February Fees can be paid in full at the time of registration or in instalments of 10 post dated cheques. All post dated cheques must be received with your child's registration package in order to secure your child's class.

When paying the full amount for the year, please provide completed registration papers & reg: fee of \$50.00 as well as \$350.00 deposit plus the balance of tuition in one payment of \$3150.00 at the time of registration or two tuition payments of \$1575.00 Please date the second payment of \$1575.00 for August 1st.

PLEASE MAKE CHEQUES PAYABLE TO CORONATION MONTESSORI PRESCHOOL Please note: Registration fee and deposit are non-refundable

Signed registration papers completed, \$50.00 registration fee and deposit of \$350.00 The signed registration papers, registration fee and deposit will hold your child's space for a maximum of 2 weeks while waiting for your cheques to arrive if necessary. The deposit of \$350.00 will be applied to your child's tuition at \$35.00 per month from September - June. Once your registration fee, deposit, paperwork and post dated cheques are provided, your child's space in the class is guaranteed. Post dated cheques from Sept. June.need to be dated for the first of the month in the amount of \$315.00. Tuition fees are non-refundable. Families who qualify for the affordable childcare funding will also need to provide post dated cheques for the year and will be reimbursed the subsidized amount monthly.

Preschool families should always feel comfortable discussing confidential financial options should the need arise.

FEE ADJUSTMENTS

PreSchool tuition is based on the year rather than the month, therefore the fees will not be adjusted because of absences due to illness, family holidays, Winter Break/Spring Break or September gradual entry.

I have read the above information and agree with this financial commitment. Parents signature:_____Date:____

FOR OFFICE USE ONLY

.\$50.00 REG FEE \$350.00 DEPOSIT 10 POST DATED CHEQUES. FULL TUITION 2 PAYMENTS

COR0NATION MONTESSORI PRESCHOOL-Reg:2025/2026

Children must be turning 3 before SEPTEMBER 1ST of the year they start (possible exceptions may apply) Your child must be fully potty trained and easily able to separate before they start. Children will not be accepted if they are also independently attending a daycare or another preschool or <u>playschool</u> during their preschool year.

(Confusion and Virus spreading are the main concerns)

In order to attend classes children need to be SYMPTOM FREE

No Coughing, Sneezing, Runny nose, Fever, Diarrhea , Vomiting , Skin rash , Sore throat etc. PLEASE PRINT CLEARLY

Name		M	_F	_Age
Birth Date (M/D/Y)	Height	inche	S	-
Weightlbs. Eye Color				
Physical Address	Postal Code			
Mom's full name:				
Email address				
Employer:	work #			
Dad's full name				
Email address	Cell #			
Employer:	work #			
Does your child have any siblings?	How many	_		
Names and ages				
Does your child have any pets?				
Has your child attended a daycare or presch	nool or any structured acti	vities, le	essons	or classes in
the past?				

Does your child have any unique challenges of which staff should be aware of? Please explain.

All authorized pick up people must be on your emergency pick up form:

Is there a custody agreement?	Yes	No	If yes,	please	explain:	(Photocopy	required)

Please indicate who **can not** pick up your child re: the custody order :

Child's Physician	Phone
Medical #	
Medication or allergies (name, dosage, side effect	ets)
Your child's immunizations should be up to da	ate: Check mark if yes
If NO then please indicate reason: medical	
explanation :	
personal choice	
Please provide a photocopy of your child's Imm	unizations:
Please provide a photocopy of your child's Birth	ertificate:



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EMERGENCY PERMISSION FORM:

PLEASE PRINT CLEARLY / 2025/2026

Child's Name:	D.O.B. M/D/YR		
Gender:			

What Celebrations or Occasions are traditionally celebrated in your family ?

I understand that if my child becomes ill while at pre-school, my child must be picked up immediately. I understand that If my child has any signs of illness, they must stay home until 24 hours have passed since their last symptom has disappeared. Init:_____

<u>PERMISSION TO CALL AN AMBULANCE</u> I give permission for the management or staff of Coronation Montessori Preschool to call an ambulance in the event of an emergency. I understand that if an ambulance needs to be called while my child is attending Coronation Montessori Preschool, that I will pay the required costs for the ambulance. PARENTS SIG: ______

<u>I GIVE PERMISSION FOR MY CHILD TO BE PHOTOGRAPHED</u> while attending Coronation Montessori Preschool . The photographs will be used for our web site, classroom and to provide parents with endearing moments. PARENTS SIG: ______

I authorize these emergency people to be contacted and to immediately pick up my child from Coronation Montessori PreSchool <u>if parents can not be reached.</u>

Emergency contact and pick up people: (At least 2 please) 1st & last name

- 1) Name______relationship_____cell_____
- 2) Name_____relationship_____cell_____

 3) Name
 relationship

Your child will not be allowed to leave Coronation Montessori preschool with anyone who is not listed on this form. Anyone picking up a child from Coronation Montessori PreSchool must bring with them each and every time, government issued photo I.D. This is for the safety and protection of your child.

Parents signature :_____