



2012 Summer Program Registration Form

Rochester Montessori School

Please fill out **both** sides of this registration and return to the RMS office.

Child's Name _____

Birth Date _____ Grade or Classroom _____ Full Day ____ Half Day _____

Home Address _____

Parent/Guardian _____ Parent/Guardian _____

Home Phone _____ Home Phone _____

Work Number _____ Work Number _____

Cell Number _____ Cell Number _____

Email _____ Email _____

5099 7th Street NW Rochester MN 55901 507.288.8725 www.rmschool.org

*Whole Child * Whole World*

| Toddler Program | | | | | | | | | |
|---------------------------------------------------|---|---|---|---|---|---|---|---|-------|
| Week | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Total |
| Half Day AM | | | | | | | | | \$ |
| Full Day | | | | | | | | | \$ |
| Children's House Program | | | | | | | | | |
| Week | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Total |
| Half Day AM | | | | | | | | | \$ |
| Full Day | | | | | | | | | \$ |
| Elementary I | | | | | | | | | |
| Week | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Total |
| Half Day AM | | | | | | | | | \$ |
| Enrichment AM | | | | | | | | | |
| Half Day PM | | | | | | | | | |
| Full Day | | | | | | | | | \$ |
| Elementary II | | | | | | | | | |
| Week | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Total |
| Half Day AM | | | | | | | | | \$ |
| Half Day PM | | | | | | | | | |
| Full Day | | | | | | | | | \$ |
| Early Drop-off & Late pick-up (CH, E1, & E2 ONLY) | | | | | | | | | |
| Week | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Total |
| EDO (\$31/wk) | | | | | | | | | \$ |
| LPU I (\$38/wk) | | | | | | | | | \$ |
| LPU II (\$46/wk) | | | | | | | | | \$ |

Fee Schedule: These prices apply to all programs:
Half Day Program \$99.00 per week
Full Day Program \$159.00 per week

Total Amount Due: _____

Amount Due with Registration (per auto withdrawal): _____

Amount Due on June 1st (see brochure pg 11): _____

(see registration information for deferred payment in brochure page 11)