



Sunset Montessori Preschool



PARENT AND ME APPLICATION

Name of Child #1 _____ Birth date _____ Gender _____

Name of Child #2 _____ Birth date _____ Gender _____

Parent/Guardian #1

Parent/Guardian #2

Name _____

Name _____

Address _____

Address _____

City and Zip _____

City and Zip _____

Cell Phone # _____

Cell Phone # _____

E-mail _____

E-mail _____

Occupation _____

Occupation _____

Signature _____

Signature _____

Today's Date _____

Do you have any experience with Montessori education? _____

Please describe other activities/classes your child participates in: _____

Describe your child's special interests/qualities: _____

How does your family enjoy spending time together? _____

How did you hear about us? _____

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