

Enrollment Form

School Year 2024-2025

Must be at least 6 years old by Sept. 10, 2024

Child's Name		Birthdate		Grade
Child's Name		Birthdate		Grade
Parent/Guardian Name				
Address(es)				
E-mail Address(es)				
Public School District (neighborhood school name) in which you reside.				
Parent #1 Work/Cell Phone	Parent #2 Work/Cell Phone		Home/Cell Phone	
Financial Sponsor (if tuition paid by a third p Name: Email:		Phone Numb	er:	
Before School Care (7:30-8:15) Please make your best guess as to how often you would need to drop off before 8:15am rarely/never occasionally every day		Payment Options Elementary Program 1st—6th Yearly \$9,488 Ten Month Payment Plan of \$948.80 Yearly Earlybird \$9,298 2% discount for paying ahead— due by 6/1/2024		
Afterschool Care (3:30-5:00) Please make your best guess as to how often you would need afterschool care: rarely/never		Middle School Program 7th & 8th Yearly \$10,922 Ten Month Payment Plan of \$1,092.20		
occasionally at least a couple day most days until 5pm	-	Yearly Earlybird \$10,704 2% discount for paying ahead— due by 6/1/2024 An enrollment fee of \$150 and a \$300 security deposit is due along with this form to enroll your child at KME.		
Kalispell Montessori is committed to a policy	v of equal opportun	ity for all persons and does	s not discriminate	e on the basis of race, color,

This document does not secure your final placement. Your enrollment will be

national or ethnic origin, age, marital status, sex, sexual orientation, gender identity, gender expression, disability, religion, or physical characteristics in employment, educational programs and activities, financial aid, and admissions policies.