## Application for Admission Early Childhood & Toddler Programs 2023-2024



46 Fox Meadow Road, Scarsdale, NY 10583

Please complete this form and return it with a non-refundable \$100 deposit. Checks should be made payable to Yellow Acorn Montessori.

Please indicate the program(s) for which you are seeking enrollment:  □ Early Childhood (3-5 year olds) − 8:45 a.m. − 2:45 p.m.  □ Late Pick-Up (3-5 year olds) − 5:00 p.m.  □ Toddler (18 months − 36 months) − Full Day: 8:45 a.m. − 3:00 p.m.  □ Toddler (18 months − 36 months) − Morning: 8:45 a.m. − 11:15 a.m.	
Application Date:	Child's Name:
Date of Birth:	□ Male □ Female
Home Address:	
City: Sta	ate: Zip Code:
Parent 1 Name	Parent 2 Name
Home Address	Home Address
Cell Phone Number	Cell Phone Number
E-mail Address	E-mail Address
Employer	Employer
Position/Title	Position/Title
Business Address	Business Address
City, State, Zip Code	City, State, Zip Code
Legal Guardian(s) (if different from above):	

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Please briefly describe your child and include any likes, dislikes, or learning needs.		
Please describe why you are seeking a Mon	tessori environment for your child.	
Please describe any previous experience yo including daycare, playgroups or classes.	ur child has had in a group care environment,	
Additional information affecting your child's fincluding any emotional, developmental, or r		
I hereby make this application for admission Montessori.	of my child as a student of Yellow Acorn	
If the above named student is enrolled, I will charges incurred by the student.	be responsible for all tuition, fees, and other	
Signature of Parent/Guardian	 Date	

Yellow Acorn Montessori does not discriminate on the basis of race, color, national or ethnic origin, religion or gender in administration of its policies or admission procedures.

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