

Broad Branch Children's House
Application for Admission



Child's Name: _____

Child's Common/Nickname: _____ Sex: Male Female

Primary Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Date of Birth: ____/____/____ Desired Date of Enrollment: ____/____/____

Please Check Programs Desired:

____ **Toddler Program (ages 2-3)** OR ____ **Primary Program (ages 3-6)**

.....
Ten Month Montessori Program OR **Twelve Month Montessori Program**

____ Half Day Morning 9:00 am - 12:15 pm

____ Twelve Month Program 8:00 am - 6:00 pm

____ School Day with Nap 9:00 am - 3:00 pm

or:

____ School Day - PM Class* 9:00 am - 3:15 pm

* For children 4 and older

and:

____ Before Care 8:00 am - 9:00 am

____ After Care 3:00 pm - 6:00 pm

Is your child completely toilet trained? Yes No

Is your child a sibling of a previous BBCH student? Yes No

Has your child participated in Baby and Me? Yes No

Has your child previously attended a Montessori school? Yes No

Has your child previously attended traditional childcare? Yes No

If so, please submit a recommendation form from the last program your child attended.

Legal guardians of child: _____

Names and ages of siblings: _____

Family status: Married Partnered Separated Divorced Single

Custody Matters: Joint Mother Father Other _____

Parent: _____

Parent: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

Employer's Name: _____

Employer's Name: _____

Work Phone: _____

Work Phone: _____

.....

Big events in your child's life: _____

Describe any social, emotional, or physical needs your child may have: _____

Describe any allergies your child has: _____

What goals do you have for your child that you hope will be attained at Broad Branch Children's House?

How did you learn about Broad Branch Children's House? _____

Why did you choose Broad Branch Children's House for your child? _____

Please enclose a \$50.00 non-refundable application fee with this application.

Signature of Parent/Guardian

Date

Upon acceptance, there is a \$550.00 non-refundable deposit to secure your child's space.

OFFICE USE ONLY

Application Rec'd ___/___/___

Check # _____

Tour/Open House: ___/___/___

Play Date Scheduled ___/___/___