

FOR ACADEMIC YEAR: _____

DEERFIELD MONTESSORI SCHOOLS

3140 Riverwoods Road
Riverwoods, Illinois 60015
(847) 945-7582

WAITING LIST FORM

SITE PREFERENCE:
(mark 1st & 2nd choice)

AGE GROUP:

PROGRAM PREFERENCE:

Deerfield - North Avenue
 Deerfield - Children's House
 Riverwoods
 Glenview

Infant/Toddler
 2-3 Class
 3-6 Class
 Elementary

Full Day
 Half Day
 2 ½ hrs
 4 ¾ hrs (includes lunch)
 6 hrs (includes lunch)

The complete Montessori Preschool Program extends through the Kindergarten year. **Elementary Montessori Program is also offered at Riverwoods Montessori School.** If you are interested in having your child attend the Deerfield Montessori Schools, please complete this form and return it with your **\$50 APPLICATION FEE** to the above address:

Child's FULL Name _____ Phone (____) _____
Home Address _____ City _____ State _____ Zip _____
Date of Birth _____ Sex _____ Place of Birth _____

Father's Name _____ Phone(____) _____
Address _____ City _____ State _____ Zip _____
Bus. Phone (____) _____

Mother's Name _____ Phone(____) _____
Address _____ City _____ State _____ Zip _____
Bus. Phone (____) _____

Please state your goals/expectations for your child as you enroll him/her in a Montessori School:

Best day(s) for school tour: ____M ____T ____W ____TH ____F (Mark 1st, 2nd, 3rd choices)

Form completed by:

Please print name

Date