

Enrollment Form

(This form must be completed in full by parents or guardians)

To initiate the registration process, this form can be saved and emailed to greymattermontessori@gmail.com Please note completing this form does not confirm registration. A staff member will contact you to finalize registration. If you would like a tour of our school or to complete this registration in person, please call us at 587.707.4739

STUDENT INFORMATION:

Last Name:	First Name:
Middle Name:	Goes by:
Date of Birth:	Boy Girl
Place of Birth:	Language spoken at home:
Child's Address:	City: Province: Postal Code:
Fully Toilet Trained? Yes No Will be by first day of school	

Please note that Students must be fully toilet trained to attend GMM. If it is found that a student is not fully trained they must wear a pull up for the duration of the class. Teachers will not be responsible for changing pull-ups. If your child needs a change, we will contact the parents/guardians.

PARENT INFORMATION:

Mother's Information	
Mother's Last Name:	First Name:
Middle Name:	Goes by:
Home Phone:	Cell Phone:
Work Phone:	Email Address:
Mother's address:	City:
	Province:
Same as Child's Address	Postal Code:
Father's Information	
Father's Last Name:	First Name:
Middle Name:	Goes by:
Home Phone:	Cell Phone:
Work Phone:	Email Address:
Father's address:	City:
	Province:
Same as Child's Address	Postal Code:
Number of Days per week:	Morning or Afternoon Class:
2 days 3 days 5 days (Tues/Thur) (Mon/Wed/Fri) (Mon to F	ri) AM (8:30-11:30am) PM (12:30-3:30pm
How did you hear about us?	Comments: