



Application for Enrollment

Luna's Montessori Bilingual School
Serving children 2 years to 6 years of age

I hereby request a space for my child for the program and location specified below. I enclosed a nonrefundable application fee of \$190.00 upon enrollment. Application will not be processed until payment is received.. **Please mail payment to: 1247 Park Ave. Alameda, Ca. 94501.**

Child's Name: _____ Age: _____ Birth Date: _____
Place of Birth: _____
Home Address: _____ City: _____ Zip: _____

Parent 1 Name: _____ Home Phone: _____
Occupation: _____ Business Phone: _____
E-mail address: _____ Home Address: _____
City, State, Zip: _____

Parent 2 Name _____ Home Phone: _____
Occupation: _____ Business Phone: _____
E-mail address: _____ Home Address: _____
City, State, Zip: _____

☐ Mark the check box if you wish to share your information for the school's parent directory.

Programs: Please circle the days of your choice

Full-Time: (7:30am-5:30pm)

5 days..... \$2,096.00
3 days.....\$ 1,675.00
2 days..... \$1,173.00

Extended Day (9:00am-3:00pm)

5 days.....\$1,725.00
3 days.....\$1,375.00
2 days\$980.00

Part-Time (9am- 12:00p.m)

5 days.....\$1,430.00
3 days\$1,115.00
2 days.....\$755.00

An additional monthly fee of \$45.00 will be charged if your child is not potty trained.

I need special schedule: Indicate schedule needs: _____

Preferred Start Date: _____ (we may or may not be able to accommodate this request)

How did you hear about Luna's Montessori Bilingual School? _____

I understand that thirty days written notice is required for all withdrawals.
Tuition is refunded on a prorated basis only with thirty days written notice.

Signature: _____ Date: _____

Office Use Only:

Application Fee Check # _____ Total Rec'd _____ Date Rec'd _____ Initials _____

Deposit fee Check# _____ Total Rec'd _____ Date Rec'd _____ Initials _____

Revised April, 2025