

Registration: Fall 2011/2012

Montessori Early Childhood Program (MECP)
Cornerstone Montessori School & Ames Lake Community Center

Parent/Caregiver Name(s): _____ Date: _____

Relationship to child/ren: _____

Address: _____
City State Zip

Phone: _____ E-mail: _____

Child Name(s) _____

Child Birthday(s): _____

Child Current Age(s): _____

Ethnicity (optional): _____ Native Language: _____

Address (if different): _____
City State Zip

If you qualify for the sliding scale tuition, please see attached document to determine payment.

Payment: \$ _____

Payable to Montessori Training Center of Minnesota

Please return with payment to: Cornerstone Montessori School
Montessori Early Childhood Program (MECP)
1611 Ames Ave
Saint Paul, Minnesota 55106

Enrollment in our program is limited; therefore, Montessori Training Center of Minnesota (MTCM) will not offer a refund for missed classes/sessions