



ST. GERARD'S MONTESSORI SCHOOL

Thornhill Road, Bray, Co. Wicklow. Tel: 01-2393436

APPLICATION FORM

Name of Child: _____ PPS: _____

Date of Birth: _____ Male/Female: _____

Proposed Year of Enrolment: _____ (School commences in September each year)

Parents' Names: _____

Address: _____

Telephone: (home) _____ (work) _____

Mobile No: (mother) _____ (father) _____

E-mail: (mother) _____ (father) _____

Emergency Contact (other than parent): _____

Contact No: _____ Relationship to Child: _____

Persons authorised to collect other than parents: _____

Contact No: _____ Relationship to Child: _____

Name of Family Doctor: _____ Telephone: _____

Allergies or any other medical condition we should be aware of:

Collection Times: (please tick your preference)

12.30pm _____ 2.30pm _____

1. Have you applied to St. Gerard's Junior School? Yes/No
2. Do you already have a Child in St. Gerard's? Yes/No
3. Are you a past-pupil of St. Gerard's? Yes/No
4. If yes, please confirm your name and date of leaving: _____

We hereby apply for our Child to be admitted to St. Gerard's Montessori School and we accept the following conditions:

1. Fees are payable on or before the first day of term.
2. **We understand that the Montessori class is a feeder school for St. Gerard's Junior School and children are admitted on the basis that they will transfer to St. Gerard's Junior School. Parents are therefore obliged to complete a Junior School application form when applying to St. Gerard's Montessori.**
3. A term's notice is required before a child is removed from the school, or a term's fees in lieu thereof.
4. The Directress reserves the right to relinquish the responsibility of the further education of a child if, in her opinion, the best interest of the school, or the child, demands it.

SIGNED: _____ DATE: _____

Completed forms should be returned to "The Directress", St. Gerard's Montessori School, Thornhill Road, Bray, Co. Wicklow.