

Discover what MONTESSORI has to offer your child.



# Hand in Hand

## Parent + Child Class

Clementine Montessori School offers a one-of-a-kind adult and child learning experience. Spend time **together** in a beautifully prepared Montessori environment, share challenges, insights, and joys of parenting in our supportive **community**. The child-size **classroom** invites exploration and discovery for children ages 18 to 36 months. Your child will learn and play, while being gently guided by a Montessori **teacher**. Caregivers will be given ideas to bring Montessori **home** to further nurture your child’s development.

**Details:**

**Schedule:** The class meets weekly at Clementine Montessori on either Monday **or** Wednesday from 9:30am - 10:45am.

**Orientation:** Before classes commence, an adult-only orientation meeting will be held on Wednesday, June 21<sup>st</sup> from 9:30am to 10:30am. The meeting will allow parents and caregivers to become familiar with the classroom, discuss roles and expectations, and review the daily schedule.

**Session Dates:**

	Monday Session	Wednesday Session
June	26 <sup>th</sup>	28 <sup>th</sup>
July	10 <sup>th</sup> , 17 <sup>th</sup> , 24 <sup>th</sup> , 31 <sup>st</sup>	12 <sup>th</sup> , 19 <sup>th</sup> , 26 <sup>th</sup>
August	7 <sup>th</sup> , 14 <sup>th</sup> , 21 <sup>st</sup>	2 <sup>nd</sup> , 9 <sup>th</sup> , 16 <sup>th</sup> , 23 <sup>rd</sup>

**Session Cost:** The 8 week summer seasonal session is \$300



---

## Clementine Montessori School

### Registration

Please be advised that enrollment in this summer session is limited to 9 students per day (and their accompanying caregiver). Submit your completed registration form to [admissions@clementinemontessori.org](mailto:admissions@clementinemontessori.org). Once your registration is received, you will receive an invoice by email detailing how to make payment in full.

Priority registration will be extended to those students enrolled at Clementine Montessori for Fall 2017 as well as siblings of currently enrolled students. All other registrations will be accepted on a first-come, first-served basis.

Circle either Monday or Wednesday Session:            **Monday**                    **Wednesday**

Child's full name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent/Caregiver's name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

A healthy snack will be provided to the children during each class. Does your child have any food sensitivities or allergies?            **YES**            **NO**            (circle one please)

If yes, please describe: \_\_\_\_\_

How did you hear about Clementine Montessori School and/or this program? \_\_\_\_\_

\_\_\_\_\_