# Casa Montessori

Teachers hold college degrees 505-325-0656

4300 College Blvd

casapreschool@gmail.com

www.casapreschoo14u.com

### **Session Times:**

Morning: 8:15 am - 11:15 am (5 days a week)

3 days Morning: 8:15 am - 11:15 am (T-W-Th)

Afternoon: 12:30 pm - 3:30 pm (3 or 5 days a week)

5 Full Days: 8:15 am - 3:30 pm

3 or 4 Full Days: 8:15 am - 3:30 pm

Pricing: Registration Fee: (Nonrefundable)

\$65 New Students

\$20 Returning Students

Half Day Sessions: 8:15-11:15 or 12:30-3:30

Morning (5 days):

\$345 a month plus tax

Morning (3 days T-W-TH): \$270 a month plus tax

Afternoon (5 days):

\$345 a month plus tax

Afternoon (3 days - T-W-Th): \$270 a month plus tax

Full Day Sessions:

8:15-3:30

3 Full Days:

\$510 a month plus tax

4 Full Days:

\$555 a month plus tax

5 Full Days:

\$675 a month plus tax

Materials Fee: (One-Time/Nonrefundable) Due by the 1st day of school: This fee covers snacks, paper, scissors, glue, crayons, Kleenex. art projects, etc. \$100 Half Day students \$200 Full Day Students.

Extra Care hours: 7:30 am - 8:15 or 3:30-4:30 at a rate of \$1.50 every five — fifteen minutes.



The most important years of growth Are the first six years of life when Unconscious learning is gradually Brought to the conscious level. Preschool and Kindergarten age Children must be potty trained. Kindergarten students may enter From Casa Montessori directly into Public School first grade, provided They have reached their sixth Birthday by August 31st. Two week's tuition plus the Registration fee must accompany This contract whether you are Paying annually or monthly. August's Tuition is the first two weeks of School. Annual payment made by September 15th, will receive a 5% Discount on tuition. All payments Are due by the 1<sup>st</sup> of the month. A \$20.00 late fee will be assessed to Payments made after the 15th of Each month. There is a tuition Discount of \$90.00 per year per Child for two or more children of The same parent.



#### **Goals of our Curriculum:**

The most important goal of our early childhood curriculum is to help children become enthusiastic learners. This means encouraging children to be active explorers who are not afraid to try out their ideas and to think their own thoughts. Our goal is to help children become independent, self-confident, inquisitive learners, who are able to learn at their own pace and in the ways that are best for them. The child is neither pushed ahead too soon nor held back waiting for the rest to catch up.

Montessori Education The learning environment has well planned centers that allow for child-choice and self-directed play, small groups, and supportive teaching that prepare children for academic excellence. Dr. Montessori emphasized that the hand is the chief teacher of the child. The apparatus is designed to carefully train the muscles, the five senses and the mental awareness of each child.

Our Montessori program gives students good habits and attitudes particularly a positive sense of themselves, which will make a difference throughout their lives.

We reserve the right to move any child to the classroom that will most suit their needs

## Montessori Curriculum:

The Montessori hands on learning approach includes:

Language

Social

**Emotional** 

Cognitive

Physical

Phonics and reading

Writing

Math

Science

Geography

Music

Sensorial

Practical life

Creative role playing

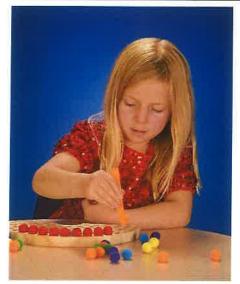
Drama

Exercise

Spanish

Preschool Program
A mixed age group
classroom so the children
learn and observe from
each other

## Casa Montessori School Contract



**Parent Signature** 

### State Of New Mexico Accredited

Member of the International Montessori Society

www.casapreschool4u.com

casapreschool@gmail.com

Find us on Facebook!

It is understood that this contract may be cancelled if the school is notified prior to August 1<sup>st</sup> and that they school will refund the prepaid tuition upon receipt of cancellation notice. If written notice of cancellation is made after August 1, the prepaid tuition will not be refunded.

Date

2025-2026 Enrollment Contrac	325-0656	
Name of Parents		
Name of Child		•
MaleFemale		
Date of Birth	Age	
Mother's email address	× 2	
Father's email address		
Sessions: Circle		
Morning Session: 8:15-11:15 am		
3 days a week – T, W, TH	5 days a week	
Afternoon Session: 12:30-3:30 pm		
3 days a week – T, W, TH	5 days a week	
Full Day: 8:15 am – 3:30 pm		
3 or 4 days a week: M T W TH F	5 days a week	

# Casa Montessori Parent Agreement

I am the parent or legal guardian of	
In order to record my understanding of my rights and respor the above-named child, who is enrolled in Casa Montessori, below and all policies set forth in the Parent Handbook.	· · · · · · · · · · · · · · · · · · ·
In return for this promise of continual fulfillment of all policie the above-named child, which meets the standards and guid Handbook.	
I understand that I will pay(monthly named child.	tuition amount) for childcare for the above
The fee as set forth herein will be in effect until I sign a new ag in advance which is due at the beginning of the month. I under this advance payment.	
Tuition payments will be made by check, cash or cred payments. A \$20.00 late fee will be charged for accoun month.	
If my child is not picked up at dismissal of the class, I widen dropped off before class is in session, I will pay the require	· · · · · · · · · · · · · · · · · · ·
I understand that there is no automatic reduction of fees who Montessori Preschool for any other reason.	en my child is on vacation or gone from Casa
I understand that if there is a global pandemic that is out of expected to be paid monthly, unless otherwise stated by Casa	
I understand there is a returned check fee of \$20.00.	
Two weeks advance written notice to Casa Montessori Preschool. <u>Casa Montessori Preschool. If two weeks advance notice is not sweeks will not be refunded.</u>	•
Parent Signature	Date
Casa Montessori Director or Manager Signature	 Date

## Casa Montessori Preschool Child's Emergency Contact Information Form

First Day of Attendance:	Last Day of Attendance:			
Child's Information:				
First and La		Midd		Birth Date
Address:				
Street	Cit	ty		Zip Code
Parent/Guardian Information				
Father's Name:			4	
			Business Phone	Cell Phone
Mother's Name:				\$ <b>2</b>
			<b>Business Phone</b>	Cell Phone
Child's Allergies:				
Physician:	Addre	ss:	Phone:	
Hospital:_SJRMC	'West m	naple – 50	5-609-6900	
I give permission for Emergence				
Transportation // YesInit	tials //No_	Initial	s of parent or guar	dian
Treatment // Yes Ir	nitials / / No	Initial:	s of parent of guard	dian
Name 2 local Emergency Contac	cts (other than	parents o	r guardian)	
1,				
Name		dress		Phone
2				
Name		dress		Phone
At the end of the day or during an	y day my child r	may be rele	ease to the person o	r persons that have
legal custody or the following person	ons:			
1,		2		
I have read and understand	the parent hand	dbook:	Initials of parent o	r guardian
Parent Signature			 Date	