



# **CORONATION MONTESSORI PRESCHOOL IN GLENMORE**

**422 Ballou Place, Kelowna B.C. V1V 1V4.**

**778-484-3121**

**coronationmontessoripreschool@gmail.com**

**coronationmontessoripreschool.ca**

## **CLASSES & FEE SCHEDULE**

**2026/2027**

**Date:\_\_\_\_\_**

**PLEASE PRINT CLEARLY**

**CHILD'S FIRST & LAST NAME:\_\_\_\_\_**

**CHILD'S D.O.B. M/D/YR. \_\_\_\_\_ AGE:\_\_\_\_\_ M F**

**MORNING CLASSES- 3 DAYS - TUES. WED. THUR. 3 HRS./ 9:00 AM TO 12:00 PM**

There is a \$50.00 registration fee required.

Tuition fees are \$350.00 per month from September - June

**Children accepted are ages 3, 4 and 5 years old.**

**Your child must be potty trained and able to separate from their parent.**

# CORONATION MONTESSORI PRESCHOOL—Reg:2026/2027

PLEASE PRINT CLEARLY

Name \_\_\_\_\_ M \_\_\_ F \_\_\_ Age \_\_\_\_\_  
Physical Address \_\_\_\_\_ Postal Code \_\_\_\_\_  
Birth Date (M/D/Y) \_\_\_\_\_ Height \_\_\_\_\_ inches  
Weight \_\_\_\_\_ lbs. Eye Color \_\_\_\_\_ Hair color \_\_\_\_\_

Mom's full name: \_\_\_\_\_  
**Email address** \_\_\_\_\_ **Cell #** \_\_\_\_\_  
Employer: \_\_\_\_\_ work # \_\_\_\_\_

Dad's full name \_\_\_\_\_  
**Email address** \_\_\_\_\_ **Cell #** \_\_\_\_\_  
Employer: \_\_\_\_\_ work # \_\_\_\_\_

Does your child have any siblings? \_\_\_\_\_ How many \_\_\_\_\_  
Names and ages \_\_\_\_\_  
Does your child have any pets? \_\_\_\_\_ Pet/s ? \_\_\_\_\_  
Has your child attended a preschool or daycare ,or any structured activities, lessons or classes in the past?  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any unique challenges of which staff should be aware of? Please explain.  
\_\_\_\_\_  
\_\_\_\_\_

**All authorized pick up people must be on your emergency pick up form:**

Is there a custody agreement? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: (Photocopy required)  
\_\_\_\_\_

Please indicate who **can not** pick up your child re: the custody order :  
\_\_\_\_\_

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Medical # \_\_\_\_\_

Medication or allergies (name, dosage, side effects) \_\_\_\_\_

**Your child's immunizations must be up to date: Check mark if yes** \_\_\_\_\_

If NO then please indicate reason: medical

explanation : \_\_\_\_\_

sig: \_\_\_\_\_

Please provide a **photocopy** of your child's Immunizations: \_\_\_\_\_

Please provide a **photocopy** of your child's Birth certificate: \_\_\_\_\_



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**EMERGENCY PERMISSION FORM:**

**PLEASE PRINT CLEARLY / 2026/2027**

**Child's Name:** \_\_\_\_\_ **D.O.B. M/D/YR** \_\_\_\_\_

**Gender:** \_\_\_\_\_

**What Celebrations or Occasions are traditionally celebrated in your family ?**

\_\_\_\_\_

**I understand that if my child becomes ill while at pre-school, my child must be picked up immediately. I understand that If my child has any signs of illness, they must stay home until 24 hours have passed since their last symptom has disappeared. Init:** \_\_\_\_\_

**PERMISSION TO CALL AN AMBULANCE** I give permission for the management or staff of Coronation Montessori Preschool to call an ambulance in the event of an emergency. I understand that if an ambulance needs to be called while my child is attending Coronation Montessori Preschool, that I will pay the required costs for the ambulance.

**PARENTS SIG:** \_\_\_\_\_

**I GIVE PERMISSION FOR MY CHILD TO BE PHOTOGRAPHED** while attending Coronation Montessori Preschool . The photographs will be used for our web site, classroom and to provide parents with endearing moments. **PARENTS SIG:** \_\_\_\_\_

**I authorize these emergency people to be contacted and to immediately pick up my child from Coronation Montessori PreSchool if parents can not be reached.**

**Emergency contact and pick up people: (At least 2 please) 1st & last name**

- |         |              |      |
|---------|--------------|------|
| 1) Name | relationship | cell |
| 2) Name | relationship | cell |
| 3) Name | relationship | cell |

**Your child will not be allowed to leave Coronation Montessori preschool with anyone who is not listed on this form. Anyone picking up a child from Coronation Montessori PreSchool must bring with them each and every time, government issued photo I.D. This is for the safety and protection of your child.**

**Parents signature :** \_\_\_\_\_