

## Christopher Academy

510 Hillcrest Avenue Westfield, New Jersey 07090-1365 (908) 233-7447 Fax (908) 322-4616

## Summer Montessori Program Registration Form 2024 9:15am – 12pm

Child's Name						
AddressCity/State				Zip		
Phone			Da	ate of Birth	Age	
Guardian #1 Name				Phone		
Guardian #1	Email					
Guardian #2 Name				Phone		
Guardian #2	Email					
Pediatrician (	Name & Phone	e)				
Allergies						
Emergency Contact				Phone		
Address			City/State			
Emergency Contact				Phone		
Address			City/State			
April 15, 2024 Enrollment is c Please indica	. The Registration to a telegrater on a telegraph telegraph which	tion Fee is applie	d toward the find ; however, additi eeks you would	al tuition. Full payn ional weeks may be	n. This fee is refundable unent is due by May 15, 2 nent is due by May 15, 2 nadded if space permits.	
June 24	July 1	July 8	July 15		July 29	
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					July29	
					•	
June 24	*July 1	July 8	July 15	July 22	July 29	

Please forward your check and registration form to: Christopher Academy, 510 Hillcrest Avenue, Westfield, New Jersey 07090