MONTESSORI GLOBAL RESEARCH INSTITUTE

53 N Old Kings Rd Ormond Beach, FL 32174 Tel. No.: (386) 492-7165 Telefax: (386) 675-6993



2025 Summer Camp Registration

Montessori Global Research Institute's Summer Camp Program offers a wide range of activities designed to engage and inspire your child, all while fostering a love for learning and exploration. Each week will be themed and include activates related to Earth Science, Group Sports, Anatomy, STEAM, arts and crafts, music, and water works. To enroll your child please complete the form below and submit it to <u>admissions@montessoriglobalri.com</u> and <u>accounting@montessoriglobalri.com</u>.

Registration: MGRI's summer program is for children 4+ (must have completed VPK if 4 y/o). To secure your child's spot a \$50 registration fee is due upon submitting your registration form. This fee is non-refundable. **Registration is due by April 15, 2025. Spaces are first come, first serve for the full day and extended day schedule.**

Tuition: Families may enroll on a weekly or monthly basis. Payments are due on the 1st of each month their child is attending summer camp, regardless of if the child is enrolled on a weekly or monthly basis. Full day or Extended day tuition is determined for the agreed upon schedule to maintain your child's enrollment and is not calculated or adjusted by days, holidays, hours of attendance, or absences. Tuition rates are as follows:

Full day	Extended day	
8:30am – 3:30pm	3:30pm – 5:30pm	
\$200 / week	\$75 / week	

Families who enroll for all available summer camp weeks in June and / or July will receive a 15% discount.

Payment Methods: Payment is accepted by credit or debit card, Zelle, ACH transfer, or check. Cash payment for tuition is not accepted. A 3.5% convenience fee will be applied to all invoices paid with a credit or debit card. Zelle payments can be sent to accounting@montessoriglobalri.com

Sibling Discounts: A tuition discount of 5% discount will apply to each sibling.

Late Payment Fee: A \$50 late fee will apply to invoices if payment is not received by close of business on the 5th business day following the invoice due date. A \$50 fee will apply to returned checks. Accounts will be sent to a third-party collection agency after 60 days of no payment or establishment of a payment plan. MGRI reserves the right to suspend a student until a past due account is current.

Late Pick-up Fee: A flat fee of \$25 for pick-ups between 5 minute and 15 minutes after designated hours. An extra charge of \$5 will be applied for every 5 minutes beyond the first 15 minutes.

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Child's Name:		
Age: Date of birth:/ Sex: Female () Male ()		
Address:		
City: State: Zip Code:		
Parent/Guardian's name:		
Relationship: Phone #:		
Parent/Guardian's name:		
Relationship: Phone #:		
Schedule Sign-up: There is no summer camp program June $2^{nd}-6^{th}$ and July $1^{st} - 5^{th}$. Please select which week(s) and/or month(s) your child will attend:		
June \square June – entire month (full day) / \square I would like extended day for the month \square June 9 th – 13 th (full day) / \square I would like extended day this week \square June 16 th – 20 th (full day) / \square I would like extended day this week \square June 23 rd – 27 th (full day) / \square I would like extended day this week		
July July - entire month (full day) / I would like extended day for the month July 7 th - July 11 th (full day) / I would like extended day this week July 14 th - July 18 th (full day) / I would like extended day this week July 21 st - July 25 th (full day) / I would like extended day this week July 21 st - July 25 th (full day) / I would like extended day this week July 28 th - August 1 st (full day) / I would like extended day this week		
In return for the Summer Camp Program schedule above, I agree to pay the tuition according to the procedures and conditions as set forth in the MGRI Family Handbook and 2025 Enhanced Summer Program packet. I agree to read the Family Handbook and the 2025 Enhanced Summer Program packet and abide by all policies, procedures and conditions outlined. If I have questions or need clarification, I know it is my responsibility to contact a Montessori Global School administrator.		

Signature: _____

Date: _____