



# Bonne Vie School

## Enrollment Application

Today's date \_\_\_\_\_ Entry date \_\_\_\_\_

Name of student \_\_\_\_\_ date of birth \_\_\_\_\_

Home address \_\_\_\_\_ zip \_\_\_\_\_ phone \_\_\_\_\_

Father's name \_\_\_\_\_ phone \_\_\_\_\_ email \_\_\_\_\_

Father's home address \_\_\_\_\_ zip \_\_\_\_\_ phone \_\_\_\_\_

Father's occupation \_\_\_\_\_ employer \_\_\_\_\_

Business address \_\_\_\_\_ zip \_\_\_\_\_ phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ phone \_\_\_\_\_ email \_\_\_\_\_

Mother's home address \_\_\_\_\_ zip \_\_\_\_\_ phone \_\_\_\_\_

Mother's occupation \_\_\_\_\_ employer \_\_\_\_\_

Business Address \_\_\_\_\_ zip \_\_\_\_\_ phone \_\_\_\_\_

Person responsible for tuition payments \_\_\_\_\_

Address (if not stated above) \_\_\_\_\_ zip \_\_\_\_\_ phone \_\_\_\_\_

Child's physician \_\_\_\_\_ phone \_\_\_\_\_

Physician's address \_\_\_\_\_ email \_\_\_\_\_

How did you hear of the Bonne Vie School? \_\_\_\_\_

Through what level will your child remain at Bonne Vie? \_\_\_\_\_

Siblings \_\_\_\_\_ age \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_

### Enrollment Procedure:

Applications must be submitted with a \$100 non-refundable fee. Applications will be reviewed as spaces become available and an interview will be set with the family and prospective student. This interview will be to determine the child's readiness for school, familiarize the child with the school environment, and to establish mutual understanding between the school and the family. The school requires a medical form and immunization record prior to entrance and every year. Students will be released only to those listed on the students record or with specific permission from one or both parents. Bonne Vie School reserves the right to terminate the attendance of any student whose presence is determined to be detrimental to either the school or the student.

Bonne Vie Head of School \_\_\_\_\_ Parent \_\_\_\_\_