

2025/2026 application

information about your child					
child's name:	date	of birth:	;	age on 9/1/2025	
child's primary address:					
parent information					
full name	cell :	phone		home phone	
home address					
email address					
employer		occupation			
hobbies & interests					
parent information					
full name	cell :	phone		home phone	
home address					
email address					
employer		occupation			
hobbies & interests					
ather members of resum famile.					
other members of your family					
name			age		
name			ag e		
name			age		

assorted information	
previous childcare:	
current childcare:	
opportunities to work with other children:	
name of pediatrician:	name of pediatrician's practice:
child's primary language:	other languages spoken in the home:
please list any past/present medical/development should be aware:	mental concerns or allergies of which we
please describe your child's personality, soci	al skills, learning style and temperament:
please list any additional information you w	ould like to share about your child:

your expectations

what experience do you have with montessori? have you researched or read any books about the philosophy?

your expectations			
what is your understa	anding about the montessori me	thod of teaching a	and learning?
what goals/expectation	ons do you have for your child'	s enrollment in o	ır program?
how did you hear abou	ut us?		
desired schedule			
please indicate you	ur desired schedule below. if y		ty, please indicate
	your order of prefe program	selection(s)	
	morning (8:15-12/12:30)	BCTCO CTOTICE/	
	full day (8:15-3)		
	extended day (8:15 - 6)		
if you need a custom	schedule (ex. 3 full days, 2 ext below:	l ended days), please	e indicate your needs
L			
signatures			
	d return the completed applicat	tion along with a	non-refundable \$50
	our house montes		
	1733 spring garde phila, pa 1913		
applications may als	to be emailed to info@ourhousen to be paid via online		n the application fee
Signature(s):			
x	Print Name:		_ Dat e:
x	Print Name:		_ Date:

child info application supplement

additional information about your chi	ld 8	& family
child's name:		date of birth:
where and with whom does your child spe	end	the day:
both parents at same address \square		are parents separated or divorced? Yes No
what time does your child	d oe s	es your child nap? Yes \square No \square
		so, what time is nap?w long do they nap?
where does your child sleep at night? Crib □ Bed □ Parent/Sibling's Bed □	_	how does your child fall asleep? by themselves \square with a pacifier/nursing \square
what age did your child begin to speak? how many words do they have?		what age did your child begin to walk? do they ever practice on stairs? Yes \(\simega \) No \(\simega \)
Does your child have Yes No chances to self-calm?	o 🗆	Is your child toilet independent? Yes \(\text{No} \)
If so, how?		If so, do they wear a diaper/pull-up at nap? Yes \square No \square
does your child If so, how often?		If so, how often?
drink from Yes □ No □a bottle?	to ar	use a lovey object Yes No No Co sleep (blanket, animal, sleep sack)?
use a Yes \square No \square pacifier?	ir	nave chances for Yes No No I independent play away from adults?
what are your child's favorite activitie	s ?	what are your child's least favorite activities?



2025/2026 tuition schedule

all children must attend 5 days a week. tuition covers enrollment for the 2025/2026 school year beginning in September 2025 for all operating days. please see school calendar for detailed schedule.

Program	Tuition
morning (8:15 - 12:00/12:30)	\$15,550
full day (8:15 - 3:00)	\$20,150
extended day (8:15 - 6:00)	\$23,970

if your family requires a mixed schedule (ex. 3 full days and 2 mornings), please contact OHM to discuss availability & pricing

tuition is payable based on one of the following schedules:

	quarterly	semi-annual	
deposit	\$1,000 deposit due with enrollment agreement		
payment 1:	25% du e 4/1/2025	50% due 6/1/2025	
payment 2:	25% du e 7/1/2025	remainder due 12/1/2025	
payment 3:	25% due 10/1/2025		
Payment 4:	remainder Due 1/1/2026		

^{**}if your family needs to discuss alternative arrangements, we are happy to work with families to find a structure that works for them**

drop-in care

drop-in care rates for morning & full day students on an as-needed basis (based on available space).

one additional period	\$40
two additional periods	\$80

lunch & snack provisions

snack and lunch are prepared from scratch with the children daily and are an important part of our program. our families take turns sponsoring the cost of groceries acquired by the school to provide ingredients for each meal on an equitable rotational basis. generally, the cost associated with this is about \$100 per student, every two and a half months.