

2026/2027 application

information about your child				
child's name:	date (of birth:	aę	ge on 9/1/2026
child's primary address:				
parent information				
full name	cell]	phone		home phone
home address				
email address				
employer		occupation		
hobbies & interests				
parent information				
parent information full name	cell j	phone		home phone
	cell j	phone		home phone
full name	cell]	phone		home phone
full name home address		phone occupation		home phone
full name home address email address				home phone
full name home address email address employer hobbies & interests				home phone
full name home address email address employer		occupation	age	home phone
full name home address email address employer hobbies & interests other members of your family		occupation	age age	home phone

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 3		ty, please indicate
	your order of prefe	selection(s)	
	program	Selections	
	morning (8:15-12/12:30)		
	full day (8:15-3)		
	extended day (8:15 - 6)		
if you need a custom	schedule (ex. 3 full days, 2 ext below:	ended days), pleaso	e indicate your needs
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@ourhouser to be paid via online		the application fee
Signature(s):			
X	Print Name:		_ Dat e:
x	Print Name:	·	_ Dat e: _

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:
with whom does your child live? both parents at same address both parents at different addresses one parent other guardian	,	are parents separated does child have any or divorced? siblings? Yes \(\Brack No \(\Brack \Brack No \(\Brack \Brack No \Brack Brack Brack No \Brack Brack
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 □ with a pacifier/nursing □
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 Yes ☐ No ☐ independent?
If so, how?		If so, do they wear a diaper/pull-up at nap? Yes □ No □
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 Seep (blanket, animal, sleep sack)?
use a Yes \square No \square pacifier?	ir	nave chances for Yes No No name independent playaway from adults?
what are your child's favorite activitie	s?	what are your child's least favorite activities?



2026/2027 tuition schedule

all children must attend 5 days a week. tuition covers enrollment for the 2026/2027 school year beginning in September 2026 for all operating days. please see school calendar for detailed schedule.

Program	Tuition
morning (8:15 - 12:00/12:30)	\$16,150
full day (8:15 - 3:00)	\$21,000
extended day (8:15 - 6:00)	\$25,050

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 wit	th enrollment agreement
payment 1:	25% du e 4/1/2026	50% du e 6/1/2026
payment 2:	25% due 7/1/2026	remainder due 12/1/2026
payment 3:	25% du e 10/1/2026	
Payment 4:	remainder Due 1/1/2027	

^{**}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.