



Bluffview
Montessori
School

**ACADEMIC YEAR 2025-2026
CHILDREN'S HOUSE DECLARATION OF INTENT TO RETURN**

(For all students presently attending the three year old program, and entering the four year old program in the 2025-2026 school year)

(Please use a separate form for each child.)

- My Child _____
WILL RETURN to Bluffview Montessori next year for the preschool academic program.

He/she will be in Children's House (check one) next fall:

- Full Day (7:45 a.m.-2:10 p.m.) 5-day - \$658/month
- Full Day (7:45 a.m.-2:10 p.m.) 3-day (Monday, Wednesday, Friday) \$425/month
- Full Day (7:45 a.m.-2:10 p.m.) 2-day (Tuesday, Thursday) - \$295/month
- Half Day AM (7:45 a.m.-10:45 a.m.) 5-day - \$430/month

- My child _____
WILL NOT RETURN to Bluffview Montessori School for the 2025-2026 academic year. I understand that a space will not be held for him/her, and that we must reapply for admission on a first come/first served basis should our plans change.

_____	_____
Signature of parent/guardian	Today's Date

**PLEASE RETURN THIS FORM TO THE OFFICE ON OR BEFORE
JANUARY 31, 2025**