



Rising Stars



Registration for the Montessori Method Early Childhood Overview

to be held on the Campus of Gordon College, Wenham, Massachusetts
Monday ~ Friday, June 28th ~ July 2nd, 2010

Participant Information

{Please copy and complete separate forms for each participant registering.}

Name of Participant: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ E-mail: _____

Are you applying to a Montessori elementary certification course? ___ yes / ___ no

If yes, name of program: _____

{Please complete if applicable.}

Name of School: _____

School Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Position: _____

Registration

I wish to register for The Montessori Method Early Childhood Overview

Fee: Complete Workshop: \$500.00 (does not include lodging)

Registration Fee (due by June 1st or with registration thereafter) \$150.00

Balance (due on or before June 28th) \$350.00

___ Check enclosed payable to Rising Stars. (Amount: _____ Ck.# _____)

___ Please charge my credit card (Type: ___ VISA/ ___ Master Card/ ___ AMEX)

*(Registration fees will be applied to Credit Cards as of June 1st if registering prior to this date.)

Card # _____ Expiration: _____

Print Name on Card: _____

Cardholder Signature: _____

Billing Address for Card: _____

___ I am interested in On-campus housing at Gordon College

On-campus housing information (if indicated) and directions will be mailed along with confirmation of registration. Please complete and return a separate form for each participant by mail or fax to:

Rising Stars ~ P.O. Box 84, Rockport, ME 04856

Phone or fax: (207) 236-6316 • E-mail: risingstars@nemontessori.org