



Dear Parents:

Thank you for your interest in our programs.

In an age of racing against the clock, Starfish is a place where time stands still.

We've purposefully created an artful, soulful space where childhood and the creative spirit are not only celebrated and nurtured, but preserved.

Our early childhood and creative education programs co-exist with shared goals of balance, integrity and respect.

Come share this journey and this time with us. We believe it will be a breath of fresh air.

The Silver Morning program offers a variety of classes every day from 8:30 a.m. – 3 p.m., for children ages two years to six years. In addition, we offer Enrichment for children transitioning to Kindergarten, as well as Elementary Tutoring sessions.

Enclosed you will find an application if you would like to be contacted and/or added to our waiting list. Please mail your completed application, along with the application fee (checks payable to Silver Morning Inc.) to our mailing address:

*Starfish*  
934 Hermosa Ave. Suite 5  
Hermosa Beach, CA 90254

When we receive your completed application, we will contact you to schedule a visit.

Sincerely,

A handwritten signature in black ink that reads "Jody Lewenthal". The signature is written in a cursive, flowing style.

Director



## **Silver Mornings 2011/2012**

### **ADMISSIONS PROCESS**

#### **Submit Completed Application**

Please submit a completed Application which we consider very carefully prior to scheduling an appointment and/or tour. We appreciate these tight economic times and are happy to apply the \$75 application fee toward your registration, should you choose to enroll your child. Please make checks payable to Silver Morning Inc. The information you give on the application form is confidential and will help us to determine your child's placement in our group. Your application to Starfish is evaluated carefully to assure that we can best serve the needs of your child and family as well as those of the rest of the program.

**All applications will be processed in the order in which they are received.**

#### **Tour/Observation**

It is important to us that both parents are involved in the admissions process. After we receive your completed application, we will contact you to schedule a tour/interview date. You will be included in a group of other interested families for a tour of Starfish. We encourage you to ask questions and become familiar with our style of education. All families must take a scheduled tour of the facilities to proceed in the admissions process. At the conclusion of each tour, the admission staff will be available to answer further questions you might have.

#### **Status of Applications**

Notification will be made as soon as possible. Upon acceptance, we require an initial non-refundable deposit (applicable to tuition) to reserve a space for your child. We cannot accommodate all applicants; therefore, we maintain an active waiting list at all times.

\*APPLICATION FEE is non-refundable, but applicable to Registration.

Starfish admits students of any race, color, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

# Silver Mornings 2011/2012

Address: 934 Hermosa Ave. Suite 11      PHONE (310) 600-0302  
Hermosa Beach, CA 90254      email: admin@StarfishHermosa.com

**Please confirm your preference for start date.**  
**Observations must be scheduled in advance of admission. Thank you for your patience!**

Preferred admission date: \_\_\_\_\_ Child's current age: \_\_\_\_\_

## PLEASE COMPLETE THE FOLLOWING INFORMATION & SUBMIT WITH APPLICATION FEE.

**CHILD'S NAME:** \_\_\_\_\_ **SEX** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

How did you learn of Starfish? \_\_\_\_\_

Do you have friends at Starfish? \_\_\_\_\_

If you were referred, who may we thank? \_\_\_\_\_

**MOTHER'S NAME:** \_\_\_\_\_

**FATHER'S NAME:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Work schedule:** \_\_\_\_\_

**Work schedule:** \_\_\_\_\_

**Parents:** Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Other \_\_\_\_\_

Siblings Names and Birthdays:

1. \_\_\_\_\_ / /

3. \_\_\_\_\_ / /

2. \_\_\_\_\_ / /

4. \_\_\_\_\_ / /

Application page 1 of 2

934 Hermosa Ave. • Hermosa Beach, CA 90254 • 310.600.0302

**1. CHILD'S CLASSROOM EXPERIENCE UP TO THE PRESENT:**

**School (include Classes)    Address & Phone    Contact Person    Dates of Enrollment:**

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**2. Are there any physical, mental or emotional conditions or concerns that we should be aware of?:** \_\_\_\_\_

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**3. How do you feel about setting limits for your child?:** \_\_\_\_\_

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**4. How do you set limits?:** \_\_\_\_\_

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**5. Child's interests and activities?:** \_\_\_\_\_

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**6. Is your child potty trained? Yes\_\_\_\_\_ No\_\_\_\_\_**

**We can help. Please describe your expectations for diapering and/or potty training ?:**

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**Words used at home for the process –any other requests or facts pertaining to toilet training:**

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**7. Please share with us why your family is interested in enrolling in Starfish:**

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**8. Please briefly describe your child:** \_\_\_\_\_

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