



BÆRUM MONTESSORISKOLE

APPLICATION FOR THE SCHOOL YEAR 2026/27

Student's Last Name	First Name	Middel Name
Home Address	Postal code/City	
Birth date	Applying Grade	Gender
Does the student currently attend a school/kindergarten?	If yes, which one?	
Parent/Guardian 1, Last Name	First Name	Middel Name
Alternative address (if any)	Postal code/City	
Email	Mobile	
Parent/Guardian 2, Last Name	First Name	Middel Name
Alternative address (if any)	Postal code/City	
Email	Mobile	
How did you hear about Bærum Montessoriskole?		
Briefly explain why you are seeking a school place for your child:		
<p>Please note the following:</p> <ul style="list-style-type: none">• Termination of a school place must be submitted in writing. Email may be used.• There is a 3-month notice period for the school. If the place is terminated, the parents are obligated to pay school fees for the following 3 months, regardless of whether the place is used or not.• Parents are expected to participate in volunteer activities, the Christmas market, the May 17th event, and in parent courses organized by the "FAU" and the school. <p><input type="checkbox"/> We consent to the information provided in this form being stored in the school's electronic administrative archive. The purpose of storing this information is for the school to contact you regarding admission. Information will be deleted according to the applicable rules in the data protection law.</p>		

School fees will be invoiced to:

- Parent/Guardian 1**
 - Parent/Guardian 2**
-

Place/Date:

Place/Date:

Signature of Both Parents/Guardians:

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Application to be sent to:

Bærum Montessori School
Ballerud allé 1
1363 Høvik
Email: post@bmskole.no

Telefonnummer:
67830840

Hjemmeside:
www.bmskole.no