



# Pakistan Montessori Council

## Pakistan Montessori Council

### School Affiliation (Membership) Application Form (A)

Please complete the following form (one form per registration please).

I declare that the information mentioned above is true to the best of my knowledge. On behalf of the School, I the under signed shall facilitate the implementation of PMC's recommended standards and effectively collaborate to elevate the School towards attaining PMC Accreditation. I agree to abide by and fulfill PMC's code of ethics, and all clauses/regulations/terms given in the PMC Affiliation Guide.

**Note: The following payment made in relation to PMC School Affiliation Program shall be effective for ONE whole year(365-days) starting from the date of endorsing this form by the undersigned.**

School Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Parent body(if any) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province/state \_\_\_\_\_ Zip code \_\_\_\_\_

Country \_\_\_\_\_ Tel. 1: \_\_\_\_\_

Tel. 2: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

***The following payment to be made to PAKISTAN MONTESSORI COUNCIL***

#### **PMC School/Institutional Affiliation Fee Payment:**

Installments (p.a.): Full (20000)  Half (10000x2)  Quarterly (5250 x 4)  Monthly (1750 x 12)

Payment Method: Cash  Cheque/Bank Draft  VPP  Cheque/DD/VPL/Voucher No.(if any): \_\_\_\_\_

***Authorized Person's Signature, Name, Designation, Date and Institution's Stamp below:***

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Stamp: \_\_\_\_\_ Date: \_\_\_\_\_