



WSMS-TEP

West Side Montessori School
Teacher Education Program

Montessori Philosophy Registration Form October 14 & 28, November 4 & 18 (9am-5:30pm)

Name: _____

Address: _____

Contact number: _____
(please list a cell or phone number contact for the day of the workshop)

Email: _____

School Affiliation: _____

Position (circle one):

Teacher Assistant Teacher Administrator Parent Caregiver Other: _____

Payment Information: Individual workshop registration fee is \$600. A discount of 10% will apply for schools with multiple participants. Please make checks payable to “West Side Montessori School” and return to: 309 West 92nd St. New York, NY 10025.

For more information please contact:

Gelsey Steinbrecher

(gsteinbrecher@wsmsnyc.org) or (908) 625-2704