



5782 / 2021-2022

Name: _____
(Last) (First) (Middle) (Hebrew)

Choose from the following options:

- ☐ **Toddler**
 - ☐ **2 Days—Tues/Thurs**
 - ☐ **3 Days—Mon/Wed/Fri**
 - ☐ **5 Days**
 - ☐ **Preschool 3's**
 - ☐ **3 Days—Mon/Wed/Fri**
 - ☐ **5 Days**
 - ☐ **Preschool 4's (5 days only)**
 - ☐ **Pre-K (5 days only)**

- ☐ Monday through Friday
- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday

- ☐ Monday through Friday
- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday (ends 3:00 PM year round)

- ☐ **Pre-Order Birthday Cupcakes (\$18 donation/birthday)**

Provider Signature: _____ Date: _____

Please check payment preference: ☐ In full ☐ By semester ☐ Monthly, by the 15th

6201 Indian Creek Drive Overland Park, KS 66212 · 913.649.4852 · office@gankc.com · www.GanKC.com

Please complete page below and return with a \$100.00 deposit.

Name: _____
(Last) (First) (Middle) (Hebrew)

Father's Name: _____ Mother's Name: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Father Cell: _____ Mother Cell: _____

E-mail for School Communications: 1. _____
2. _____

Emergency Contact 1: _____

(Name)	(Phone Number)	(Relation)
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Emergency Contact 2: _____

(Name)	(Phone Number)	(Relation)
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Return signed registration form along with a \$100 non-refundable registration fee.

For Office Use Only:

Start Date

We Specialize in Happy Children!