## 2025-2026 LANK APPLICATION

Child's Full Name	Preferred Name	DOB	
Address	City, State	Zip	
Parent #1 Information	Parent #2 Information		
Name	Name		
Address	Address		
Phone Number	Phone Number		
Email Address	Email Address	Email Address	
Employer	Employer	Employer	
Work Number	Work Number	Work Number	
[ ] 5 Day (M-F) [ ] 3 Day (MW	n who will turn 2 by September 30 <sup>th</sup> )  /F) [] 2 Day (TR)  children who will turn 3 in October, N	November, December)	
, , , , , , , , , , , , , , , , , , , ,	en who turn 4 before September 30 <sup>th</sup>	n)	
[ ] 5 Day [ ] Full Day (5 Day+;	·	,	
[ ] Kindergarten (for children w	rho turn 5 before September 30 <sup>th</sup> )		
Explore and More: Specify Day(s) *Explore and More is designed	d for our 4 and 5 Day AM Preschool and Pre-k	 <pre>c<pre>programs*</pre></pre>	
APPLICATION FEE (non-refundable) \$20	00 [ ] Check payable to LANK [	] invoice my account	
I have received and understand LANK	's policy on Application Fee refunds	and credits.	
Signature of Parent or Guardian	Date	Date	