

ENROLLMENT FORM

Maintain enrollment forms required by child care licensing and CACFP federal regulations for each participant. Enrollment Forms must:

1. Be updated annually and signed by a parent or guardian of the participant
2. Identify the "normal" days and hours in care for each enrolled participant
3. Identify the meals to be received by each enrolled participant

Addendum to Enrollment Form For Child Care

UCHRA Van Buren County HeadStart

Name of Child Care Facility

Instructions: This Addendum may be used to meet the enrollment data requirements of the Child and Adult Care Food Program as mandated by the Interim Rule issued on September 1, 2004, by the U.S. Department of Agriculture. The Addendum will be valid for one calendar year following the date of the parent's or guardian's signature.

Participant Name: _____
Last First Middle Initial

Normal Day of Care (Circle as Appropriate) :

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Normal Hours of Care During School Year: _____ to _____
_____ n/a _____ to _____ n/a _____

Normal Hours of Care During Summer: _____ n/a _____ to _____ n/a _____
_____ n/a _____ to _____ n/a _____

Participant Meals (Circle as Appropriate)

Breakfast AM Supplement Lunch
PM Supplement Supper Evening Supplement

Parent/ Guardian Name: _____
Last First Middle Initial

Parent/Guardian Daytime Telephone Number: Area Code: _____ **Number:** _____

Signature of Parent/Guardian _____ **Date of Signature** _____