Child Care Assistance Enrollment

Parent/Guardian Name:

[   ]

Child's Name:

[   ]

Child's Date of Birth:

[   ]

Home Address:

[   ]

Contact Phone Number:

[   ]

Email Address:

[   ]

Household Monthly Income:

[   ]

Do you currently participate in any government assistance programs?

☐ SNAP ☐ TANF ☐ WIC

Additional Comments:

[   ]

[Submit]