

WebCAF ID# _____

CACFP Roster Number _____

Child and Adult Care Food Program
CACFP CHILD ENROLLMENT FORM
 Child Care Centers/Head Start Programs

Sponsor Name: Head Start of Lane County Site Name: _____
 CACFP Sponsor Name/Site Name

TO BE COMPLETED BY PARENT/GUARDIAN ONLY

The CACFP reimburses centers for serving nutritious, well-balanced meals and snacks to children in care. Complete the following chart for all children in care. Sign, date, and submit it to the center. Use additional forms, as needed.

Children's Names	Normal Hours in Care		Normal Meals and Normal Days in Care
	Enter the <u>time</u> your child usually <i>arrives</i> each day.	Enter the <u>time</u> your child usually <i>leaves</i> each day.	
Last			Normal Meals While In Care Breakfast AM Snack Lunch PM Snack Supper Eve Snack <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
First	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Normal Days of the Week in Attendance Mon Tue Wed Thu Fri Sat Sun <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Last			Normal Meals While In Care Breakfast AM Snack Lunch PM Snack Supper Eve Snack <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Parent/Guardian Print Name: _____ Date: _____

Parent/Guardian Signature: _____

<u>Annual Updates:</u>	The parent/guardian signing this form certifies that the enrollment information is correct. If information has changed, the parent/guardian has written the appropriate changes on the form and initialed the change. <i>If there are many changes, please complete a new form.</i>	
First Annual Update	Parent/Guardian Signature	Date
Second Annual Update	Parent/Guardian Signature	Date
Third Annual Update	Parent/Guardian Signature	Date
Fourth Annual Update	Parent/Guardian Signature	Date

This institution is an equal opportunity provider.