CHILD & ADULT CARE FOOD PROGRAM
ENROLLMENT STATEMENT FOR CENTERS AND HOMES

This Enrollment Statement is current for one year from the date of parent or guardian signature and must be renewed annually (every year).

(Name of Child) Date of Birth

(Name of Child) Date of Birth

(Name of Child) Date of Birth

(Name of Child) Date of Birth

(Name of Center or Family Day Care Home Provider)

(Address of Center or Family Day Care Home Provider)

Enrollment Date: _____
(Month/Day/Year)

Signature: _____ **Date:** _____
Parent or Guardian (Month/Day/Year)

The Child & Adult Care Food Program provides reimbursement for each meal and/or snack served, therefore, parents or guardians need not provide or pay for any food served to their enrolled participant.

FOR CHILD/ADULT CARE CENTER OR FAMILY DAY CARE HOME SPONSORS' USE ONLY:

Eligibility Classification: _____

Signature of Determining Official: _____

Date: _____

Date Child Withdrew: _____

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