**Ohio Department of Education - Office for Child Nutrition**

**CHILD AND ADULT CARE FOOD PROGRAM**

**ENROLLMENT FORM**

Required Form for use by Child Care Centers and Head Start Programs

CACFP programs exempt from having an enrollment form on file are: Emergency Shelters, Outside-School-Hours, Youth Development & After School At Risk

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### Instructions for Completion

- All parents/guardians are to complete a separate form for each child enrolled at the child care or Head Start center.
- List the child’s name, age, birth date, the days and hours normally in care and the meals normally received while in care.
- If schedule listed will frequently vary due to changes in parent/guardian schedule, check response box below chart.
- If the child comes before and after school, list the hours in care for both the morning and afternoon.
- CACFP Federal regulations 226.15(e) (2) require that an enrollment form be **completed annually** and signed by the child’s parent or guardian.

---

### CENTER NAME

<table>
<thead>
<tr>
<th>CHILD’S NAME (please print)</th>
<th>AGE</th>
<th>BIRTHDATE / / month / day / year</th>
</tr>
</thead>
</table>

---

### CHECK THE NORMAL DAYS AND HOURS YOUR CHILD IS IN CARE AND THE MEALS RECEIVED WHILE IN CARE

<table>
<thead>
<tr>
<th>Check (✔) Days Child Normally in Care</th>
<th>List Hours Child Normally in Care</th>
<th>Check (✔) Meals Child Normally Receives while in Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Arrive Depart Arrive Depart</td>
<td>Breakfast AM Snack Lunch PM Snack Supper Evening Snack</td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sunday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Yes, The schedule listed above may frequently vary due to changes in parents/guardians schedule

---

### SIGNATURE OF PARENT/GUARDIAN

<table>
<thead>
<tr>
<th>DATE</th>
<th>DAY PHONE NUMBER</th>
</tr>
</thead>
</table>

### MAILING ADDRESS:

<table>
<thead>
<tr>
<th>STREET / APT.</th>
<th>CITY</th>
<th>ZIP CODE</th>
</tr>
</thead>
</table>

---

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ascr.usda.gov/complaint_filing_cust.html), (AD-3027) found online at: [http://www.ascr.usda.gov/complaint_filing_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410;
(2) Fax: (202) 690-7442; or
(3) Email: program.intake@usda.gov.

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### CENTER NAME

**Sunshine Child Care**

### CHILD’S NAME

(please print)

**ANNIE JONES**

### AGE

5

### BIRTHDATE

9 / 4 / 2009

### CHECK THE NORMAL DAYS AND HOURS YOUR CHILD IS IN CARE AND THE MEALS RECEIVED WHILE IN CARE

<table>
<thead>
<tr>
<th>Days Normally in Care</th>
<th>List Hours Child Normally in Care</th>
<th>Meals Child Normally Receives while in Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>7:00 am - 8:15 am; 4:15 pm - 6:00 pm</td>
<td>Breakfast, AM Snack, Lunch, PM Snack, Supper, Evening Snack</td>
</tr>
<tr>
<td>Tuesday</td>
<td>7:00 am - 6:00 pm</td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td>7:00 am - 8:15 am; 4:15 pm - 6:00 pm</td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td>7:00 am - 6:00 pm</td>
<td></td>
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<td>Friday</td>
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<td>Saturday</td>
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<tr>
<td>Sunday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Yes, The schedule listed above may frequently vary due to changes in parents/guardians schedule

### SIGNATURE OF PARENT/GUARDIAN

**Mary Jones**

### DATE

7/13/2015

### DAY PHONE NUMBER

(614) 222-3344

### MAILING ADDRESS:

123 Park St.

Columbus, OH 43215

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