

Ohio Department of Education – Office for Safety, Health and Nutrition
CHILD AND ADULT CARE FOOD PROGRAM ENROLLMENT FORM
 Prototype 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

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 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 the enrollment form be updated annually and signed by the child's parent or guardian.

CENTER NAME

CHILD'S NAME (please print)	AGE	BIRTHDATE month / day / year
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CHECK THE NORMAL DAYS AND HOURS YOUR CHILD IS IN CARE AND THE MEALS RECEIVED WHILE IN CARE

Check (✓) Days Child Normally in Care	List Hours Child Normally in Care				Check (✓) Meals Child Normally Receives while in Care					
	Arrive	Depart	Arrive	Depart	Breakfast	AM Snack	Lunch	PM Snack	Supper	Evening Snack
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										
Sunday										

SIGNATURE OF PARENT/GUARDIAN	DATE	DAY PHONE NUMBER
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MAILING ADDRESS STREET /APT.	CITY	ZIP CODE
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