

Will County Childcare Association
Membership and Referral Data 2012-2013

Please Print Date _____

NAME _____

BUSINESS NAME _____

ADDRESS/ CITY/ZIP _____

HOME TELEPHONE # (_____) _____ CELL (_____) _____

EMAIL _____ DATE OF BIRTH (mm/yy) _____

BUSINESS WEBSITE _____

Nearby Intersections or Highways _____

Nearby Schools _____

Do you provide transportation? _____ If yes, to which schools? _____

Care Available:

___ FT ___ Before-After School ___ Evenings Do you have pets? _____

___ PT ___ Sat. ___ Sun. ___ Nights Type of pets? _____

Ages care for: (mark all that apply)

___ Infants (0-12mo) ___ Toddlers(13-23mo) ___ Twos(24-35mo) ___ Preschool (3-5yrs) ___ School Age (5+yrs)

Other Information/Specialties: _____

<p>Please check one:</p> <p><input type="checkbox"/> New Member</p> <p><input type="checkbox"/> Renewal</p> <p><input type="checkbox"/> I paid/mailed my membership (date _____) Check number _____ Amount _____</p>	<p>Early Bird Registration \$40.00 (May 1st-May 31)</p> <p>Membership Rate \$50.00 for 1 year, Sept to May</p> <p>Make checks or money orders payable to: Will County Childcare Association</p>
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SELECT: I give permission to publish my personal information in the membership directory, for members only.
 I DO NOT give permission to publish my personal information in the membership directory.

I give permission to publish my name and business contact information on the WCCA website.
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Contact Darlene Huston, webmaster, to confirm information for website: owner@abchildcarehome.com or 815-210-0274

Mail form and payment to: Sarah Hamilton, Treasurer
369 Brink Drive
Joliet, IL 60435

Any questions call: Treasurer: Sarah Hamilton 815-725-7654
Referrals: Coleen Cirricione 815-729-0859

Please make a copy for your records