

Classroom: _____

CACFP Determination: _____

**Child and Adult Care Food Program
Child Enrollment Form**

Enrollment Date:

Child Name:	Parent Name:
Address:	Address:
Birth Date:	Phone #:
	Email:

Sponsoring Organization:	Classroom:
Butler County Children's Center Inc. DBA Early Learning Connections	Address:
139 Rieger Road	
Butler, PA 16001	
724-287-2761	

Normal Hours of Care (Write in times)*

Monday	Tuesday	Wednesday	Thursday	Friday
Start:	Start:	Start:	Start:	Start:
End:	End:	End:	End:	End:

Daily Expected Meal Service Participation (Please check box)

Breakfast	AM Snack	Lunch	PM Snack	Supper	Evening Snack

Signature _____
Parent/Guardian

Date _____

Signature _____
Center Administrator

Date _____

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or
2. *fax:*
(833) 256-1665 or (202) 690-7442; or
3. *email:*
Program.Intake@usda.gov

This institution is an equal opportunity provider.