

Child and Adult Care Food Program (CACFP) *Child Enrollment Form*
Bright Futures

Dear Parents and Guardians.

The Bright Futures preschool program participates in the Child and Adult Care Food Program (CACFP). CACFP provides the daily nutritious meals and snacks, offered to your child while s/he is enrolled in Bright Futures, **at no cost to you**. At the beginning of each school year, CACFP requires the completion of a *CACFP Child Enrollment Form* for every child who attends the Bright Futures preschool program, and must be received in the Bright Futures office before your child starts school. A Bright Futures representative will review this form and, if necessary, return it to you for completion.

Section 1 ~ Family Information

Child Name _____ Date of Birth _____
Parent/Guardian Name(s) _____
Address _____ Apt/Unit # _____ Zip _____
Telephone (Home) _____ (Cell) _____
(Other) _____ (Other) _____

Section 2 ~ Parental Contact Information

Representatives from the School District of Philadelphia and/or the State Agency may contact you to verify your child's participation in CACFP. Please place a check mark next to the time and method of contact you prefer:

Telephone: I prefer to be contacted by telephone. The best time to contact me is during the:
_____ Day (9:00 AM – 5:00 PM) at this phone number _____
_____ Evening (6:00 PM – 9:00 PM) at this phone number _____

U.S. Mail I prefer to be contacted by U.S. mail at the address listed above.

Section 3 ~ Signatures

To the best of my knowledge, the information provided on both sides of this *Child Enrollment Form* accurately represents my family's participation in the CACFP. When changes occur, I agree to inform the Bright Futures preschool program.

Parent/Guardian signature (required) _____ Date _____

Parent/Guardian signature (required) _____ Date _____

Submit your child's completed *CACFP Child Enrollment Form* to: The School District of Philadelphia
440 N. Broad St. ~ Suite 170
Bright Futures ~ Sue Maraschiello
Philadelphia, PA 19130-4015

Please see the reverse side for additional information.

Section 4 ~ CACFP Participating Location Information

Sponsoring Organization: The School District of Philadelphia Address: 440 N. Broad St. Philadelphia, PA 19130	Location: Address:
NOTE: The above location name and address will be completed when your child begins Bright Futures.	

Section 5 ~ Hours of Service (hours may vary slightly, depending on Bright Futures location)

Monday	Tuesday	Wednesday	Thursday	Friday
8:30 AM – 3:10 PM	8:30 AM – 3:10 PM	8:30 AM – 3:10 PM	8:30 AM – 3:10 PM	8:30 AM – 12:30 PM

Section 6 ~ Daily Expected Meal Service Participation

Breakfast	Morning Snack	Lunch	Afternoon Snack (except Friday)
YES	N/A	YES	YES

The information you provide on this form is confidential, and will remain on file in the School District of Philadelphia, Office of Early Childhood, 440 N. Broad Street, Philadelphia, PA.

If you need assistance in completing this form, please contact Sue Maraschiello by telephone at 215-400-5757 or by email at BrightFutures@philasd.org.

If you have questions concerning how the information on this form will be used, please call Leonard Rossio, CACFP representative for the School District of Philadelphia, at 215-400-5743.

FOR SCHOOL DISTRICT OF PHILADELPHIA USE ONLY

_____ Bright Futures

Child: _____

CACFP Enrollment Date: _____ **CACFP Withdraw Date:** _____

Signature _____ **Date** _____

School District of Philadelphia Administrator/Representative

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