

Jefferson County Child Care Association Membership Application

JCCCA MISSION STATEMENT

The Jefferson County Child Care Association (JCCCA) is a non-profit organization formed by and for Licensed Child Care Professionals to support and enhance their business, the children in their care, the community, and themselves. Our Mission is to:

- *Enhance and promote professionalism*
- *Promote a continuing education source to encourage quality and longevity*
- *Act as a liaison between providers and the Department of Human Services Licensing Department and the Office of Child Care Services*
- *Have a voice in the Child Care Rules and Regulations at both the state and county levels*
- *Affect pertinent legislation at both the state and national levels.*
- *Qualify for group rates for Family Child Care Liability and personal Health Insurance (CAFCC)*
- *Work with the community on issues concerning the health, safety and education of children.*
- *JCCCA is an affiliate of the Colorado Association of Family Child Care (CAFCC)*
- *JCCCA is a strong advocate of the Child Care Food Programs.*

Jefferson County Child Care Association membership application and fees are due June 30.

The membership application and fee will cover renewals and new memberships for the fiscal year July 1, 2009 – June 30 2010. Please read and fill out the following information completely. Make your checks payable to JCCCA. Mail your application, membership fee, and a self addressed stamped envelope to our JCCCA Membership Processor / Treasurer.

Kim Roby, 12296 West Ohio Place, Lakewood, Colorado 80228

For questions on membership or fees please call Kim 303-988-8368

_____ JCCCA NEW APPLICATION (not a member last year)	\$35_____
_____ JCCCA RENEWAL APPLICATION (member last year)	\$35_____
_____ 15 MONTH JCCCA APPLICATION (April 1 – June 30)	\$40_____
_____ 18 MONTH JCCCA APPLICATION (January 1 – June 30)	\$50_____
_____ CAFCC MEMBERSHIP (Colorado Association Family Child Care) (Please enclose a SEPARATE check payable to CAFCC)	\$30_____
_____ NAFCC MEMBERSHIP (National Association Family Child Care) (Please enclose a SEPARATE check payable to NAFCC)	\$35_____

NAME _____ PHONE _____

BUSINESS NAME _____ E-MAILADDRESS _____

ADDRESS _____ CITY _____ CO. ZIP _____

LICENSE# _____ BIRTHDAY _____ SPOUSE / ANNIVERSARY _____ / _____

JCCCA MEMBERS are asked to **ACTIVELY** support and participate in their professional organization (JCCCA) by volunteering in some respect. I would like to participate in the following:

- | | | |
|----------------------------------|-------------------|--|
| _____ JCCCA BOARD | _____ ADVERTISING | _____ CRAFT EXTRAVAGANZA (Nov) |
| _____ NEWSLETTER STAFF | _____ PUBLICITY | _____ TOUR OF HOMES (Sept.) |
| _____ REFERRAL PROVIDER | _____ MENTORING | _____ LEGISLATIVE / ZONING |
| _____ "WHAT IT TAKES" CONFERENCE | | _____ HOSPITALITY (Bring food to meetings) |

I agree to abide by the current Jefferson County Child Care Association Bylaws.

(Copies of JCCCA BYLAWS are available upon request at JCCCA association meetings).

SIGNATURE _____ DATE _____