



E-CHILD CARE

CAMDEN COUNTY DEPARTMENT OF CHILDREN'S SERVICES

Alternate Card Request Form

To Whom It May Concern:

I am in need of alternate e-Child Care cards for the following individuals who will be dropping off and/or picking up my child/children. I understand that I may only designate up to two people. **My provider cannot be one of the two alternate card holders.**

1. Alternate's Name: _____

Alternate's Date of Birth: ____/____/____ New Card Re-Issue

2. Alternate's Name: _____

Alternate's Date of Birth: ____/____/____ New Card Re-Issue

Parent's Signature _____/____/____
Date

Note: All cards requested will be mailed directly to the address of the primary card holder.

Please submit this form to:

**Camden County
Department of Children's Services**
512 Lakeland Road
DiPiero Center, Suite 200
Blackwood, NJ 08012

or FAX to:
856-374-6384

or E-mail to:
maureen.higgins@camdencounty.com

PRIMARY CARD HOLDERS:

If you are in need of a replacement card for yourself, **you must contact us directly within 3 days of losing your card.**
Please call or email:

Maureen Higgins
ECC Specialist

856-583-0229
or
maureen.higgins@camdencounty.com