

Work First New Jersey  
Child Care Registration Information

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**NAME OF CHILD CARE PROGRAM**

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**EPPIC NUMBER**

*Note to Parent/Guardian:* The Department of Human Services, Division of Family Development (DHS/DFD), the administering authority for the New Jersey Child Care Subsidy Program, authorizes the Child Care Resource and Referral Agency (CCR&R) or designee to pay a one-time registration fee (up to \$50) for your child who is receiving child care services through the Work First New Jersey Program.

Child's Name:

Case #:

Date of Birth:

Address:

City/Zip:

Phone:

Date of Child's Enrollment:

- I understand that DHS/DFD will only pay a one-time registration fee up to \$50.00 for each child.
- I understand that payment can only be issued to a licensed center, summer camp, or registered family child care provider approved by the Office of Licensing, Department of Education, or Department of Health.
- I understand that a copy of this form must be submitted for each child who will be receiving child care services.
- I have read and understand the registration policy and hereby agree to the above terms & conditions.

Parent/Guardian Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider/Program Administrator Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Provider/Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Internal Office Use Only**

**Approved by Child Care Resource & Referral**

\_\_\_\_\_  
Agency Signature

\_\_\_\_\_  
Date

Amount Authorized - \$ \_\_\_\_\_