Membership Application



Tampa Home Child Care Providers Association

Membership Purpose and Privileges:

To promote professionalism and quality family child care. To provide support to its members.

Training opportunities at monthly meetings, association web site for advertisement and information, networking with other family child care providers, business help and advise, and shared information on programs that benefit family child care.

Duration of membership

Association memberships are renewed annually.

Individual membership (Annual fee: \$50.00)

Name E-mail address

Street address License number Birthday

City Zip code Phone number

Please check all the	at apply to your far	nily child care program:	
Infant Care	Toddle	Toddlers/Preschoolers	
After School Car	re Part Ti	Part Time Care	
Drop In Care	Summ	Summer Care	
Nights/Weekend	I Care Vouche	Voucher Program	
Food Program	QCK	QCK	
CDA	Accred	Accreditation	
Second Helping	College	College Degree	
Master Provider	Mento	Mentor	
Other			
Substi	tute or Advocate	membership (Annual fee: \$25.00)	
Name		E-mail Address	
Street address		Birthday	
City	Zip code	Phone number	
Membership type			
Substitute	Other		
payment made to	o THCCPA along v THCCPA mailing	sh, check, or money order please submit with a copy of your current child care license address: THCCPA, 3130 W. Powhatan Ave., apa, FL 33614.	
Date Received	Received by	Payment type	