

Parent E-Child Care Card Request Form

Please use this form to designate alternates and report Families First Card Numbers.

Parent/ Participant Information:

Participant's name: _____	Case # _____
Families First Card # _____ (16 digits)	
I activated my Families First Card for child care services on: _____ / _____ / _____ Month Day Year	
<input type="checkbox"/> I do not have a Families First Card	
E-Child Care # _____ (16 digits)	
I activated my child E-childcare card on: _____ / _____ / _____ Month Day Year	
<input type="checkbox"/> I do not have an E-Child Care Card	

In order to have your most up to date information, please provide us with your current address and phone number :
Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone Number: (____) _____ - _____ Cell Number: (____) _____ - _____

Designee/ Alternate Information:

Families can get up to two (2) additional cards for people who are authorized by the parent to drop off or pick up their children from child care pursuant to Office of Licensing Regulations. Each participant and designee will have their own card and PIN.

Please complete with your designee's name and date of birth to request additional cards:

Designee #1:		
_____	_____	_____
Designee's First name	Designee's Last name	Designee's Date of Birth

Designee #2:		
_____	_____	_____
Designee's First name	Designee's Last name	Designee's Date of Birth

Providers are not allowed to record attendance on the parent or designee's behalf. Any call-in by the provider is considered a misuse of the card and may result in the termination of the parent's child care arrangements as well as provider sanctions, including but not limited to monetary penalties.

Parent's Signature

Date

**Submit completed form to:
Programs for Parents, 570 Broad Street 8th Fl, Newark, NJ 07102**