



EveryChild CALIFORNIA

Association of Leaders
Advancing Early Learning

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Formerly CCDAA

Please print clearly and complete entire form

PERSONAL DETAILS

New Renew

NAME: _____ POSITION: _____

AGENCY: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

EMAIL: _____ AGENCY WEBSITE: _____

MEMBERSHIP RENEWAL? YES NO AGENCY LOCATION? NORTHERN CA CENTRAL CA SOUTHERN CA

Please check all programs administered within your agency

<input type="checkbox"/> 21st Century	<input type="checkbox"/> Child and Adult Care Food Program
<input type="checkbox"/> After School Education and Safety	<input type="checkbox"/> Early Head Start
<input type="checkbox"/> Alternative Payment	<input type="checkbox"/> Family Child Care Home Education - CCTR (SRR)
<input type="checkbox"/> California State Preschool Program – Full Day – CSPP	<input type="checkbox"/> Family Child Care Home Education - CFCC (RMR)
<input type="checkbox"/> California State Preschool Program – Part Day – CSPP	<input type="checkbox"/> First 5
<input type="checkbox"/> CalWorks	<input type="checkbox"/> Head Start
<input type="checkbox"/> Campus Child Development	<input type="checkbox"/> Local Planning Council
<input type="checkbox"/> Center Based – Infant/toddler – CCTR	<input type="checkbox"/> Migrant Child Care
<input type="checkbox"/> Center Based – Preschool - CCTR	<input type="checkbox"/> Resource and Referral
<input type="checkbox"/> Center Based – School Age – CCTR	<input type="checkbox"/> Transitional Kindergarten
<input type="checkbox"/> Charter School	<input type="checkbox"/> Other:
<input type="checkbox"/> Sub-contract to other agencies	<input type="checkbox"/> Are a sub-contractor
With whom:	With whom:

Please choose the type(s) of membership you would like:

<input type="checkbox"/>	COMPREHENSIVE - \$300.00 Comprehensive membership includes all the rights and privileges of membership including but not limited to voting, serving on a State or Section Board, chairing or serving on committees, and attending all meetings, trainings and events at the member rate. Includes the ability to add on unlimited Affiliate memberships.
<input type="checkbox"/>	AFFILIATE – DIRECTLY LINKED TO COMPREHENSIVE MEMBER \$150.00 Affiliate memberships must be associated with a current Comprehensive membership. Affiliate members must be employed by the same agency as the Comprehensive member. Affiliate membership privileges include attending meetings, trainings, and events at the member rate and receiving all written communications that are received by the general membership. Please list names on back.
<input type="checkbox"/>	ASSOCIATE - \$300.00 – Those dedicated to Early Childhood Education in non-publicly funded programs.
<input type="checkbox"/>	INDUSTRY - \$500.00 – Those businesses and organizations who feature products or services that benefit early care and education programs.
<input type="checkbox"/>	Retired: \$100.00 Lifetime. For former members who are not actively working in the field but would like to stay updated.

ADDITIONAL MEMBERS

Please enter name, email address and membership type for each new member and/or member renewal within your agency.

Name	Email	Comprehensive \$300.00	Affiliates \$150.00
Please list additional names/emails on a separate sheet if needed.			
		Number of Comprehensive x \$300 =	
		Number of Affiliate x \$150 =	
TOTAL			

PAYMENT DETAILS: Check enclosed Send Invoice Purchase Order# _____ Credit Card

CARD NUMBER: _____ TYPE: VISA MASTERCARD EXP. DATE _____

NAME ON CARD: _____ CARDHOLDER ZIP CODE: _____

SIGNATURE: _____ DATE: _____

Thank you for your new and continued membership with EveryChild California. If you have any questions regarding membership, please contact us at info@everychildca.org or 916-443-5919.