



KIDCARE PROVIDER APPLICATION

Name: _____

Address: _____

Phone: Home _____

Cell _____

Work _____

Email _____

Please circle the ONE best contact number (either the email or one phone number)

Have you been "Safe Place" trained? YES NO

Are you over the age of 17? YES NO IF NO, how old are you? _____

Does your health permit you to lift children? YES NO

Are you willing to work as: (please circle one)

Volunteer, non-paid

Paid only

Either volunteer or paid

What time of day do you prefer to work? (please circle all that apply)

Daytime only

Evening only

What days do you prefer to work? (please circle any that apply)

Weekdays only (Mon-Fri)

Weekends only (Sat. and Sun.)

Are you interested in working an on-going, regularly scheduled event, i.e. Ladies Bible Class?

YES

NO

Are you interested in having your name and contact information passed on to area churches of Christ that are looking for childcare workers for various special events? YES NO

What ages do you prefer to care for? (please circle all that apply)

Infants (up to one year and non-walkers)

Early Elementary (Kindergarten-2nd grade)

Toddlers (walkers, 1-2 year olds)

Late Elementary (3rd-5th grades)

Preschoolers (3-5 years old)

Jr. High (6th-8th grades)

High School (9th grade and up)

This may not be the exact breakdown of ages at all childcare events; often various age groups will be combined.