

CHILD CARE REFERRAL FORM

Your Contact Information

Do You Need Child Care? The YWCA Can Help!

Are you looking for someone to care for your child(ren) while you work or go to school? Do you need a preschool program where your child can grow and learn? Would you like your child to develop new friendships and practice social interaction? Let us help you with your search for quality care. Fill out this form and mail or fax it back to us, and we'll send you a list of child care providers in your area.

Your Family Information

Name:	Your Age: 13-19 Years 20 & Over
Address:	How many children are in your family?
City:	How many children need care?
State: Zip Code	Is this a one or two parent family?
Primary Phone No	Where do you work?
Alternate Phone No	Where does the second adult work?
Fax No	
Email:	
Your Children	
NAME BIRTH DA	TE ELEMENTARY SCHOOL
	
Your Child Care Needs	
What days of the week do you need care? (Please circle days.) Su M T W Th F Sa	
What hours do you need care? From::(am/pm) To::(am/pm)	
What type(s) of care would you like to consider?Center Family Day Care Home	
Summer Program Preschool Before/After School Care	

Child Care Resource and Referral YWCA Metropolitan Chicago Patterson and McDaniel Family Center 2055 W. Army Trail Rd. Ste. 140, Addison, IL 60101 Teléfono: 630-790-6600 Fax: 630-629-7801

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