



Valley Family Child Care Association is a professional association of licensed family providers in Alameda county. We provide educational opportunities, support, networking, and fellowship for our members. It is a proven fact that the better educated a childcare provider is – the higher quality of care they provide to children. By informing and educating our members, we feel more professional and confident in our skills. With these tools, we can portray family childcare as a viable and competitive option for families seeking quality childcare. Our members meet on the 2nd Tuesday of the month from 6:30pm – 8:30 pm via Zoom.

**Membership fee:** \$65.00 /year. We renew every year by June 1<sup>st</sup>. We accept payment in PayPal([vfcca19@gmail.com](mailto:vfcca19@gmail.com)), Zelle ([vfcca19@gmail.com](mailto:vfcca19@gmail.com)) or Checks (check payable to VFCCA). Please send checks to **Varshini Kannan, 1452 N Vasco Rd Suite 105 Livermore CA. 94551**

**New Members:** To join the Association please send a completed registration and a copy of your license and the VFCCA membership fee. Feel free to contact any of the Board members for any questions. Email: [vfcca2023@gmail.com](mailto:vfcca2023@gmail.com)

<b>President</b>	Lisa Zarodney	925-337-0614
<b>Vice-President</b>	Jagdeep K Gupta	408-507-9583
<b>Treasurer</b>	Varshini Kannan	952-686-4090
<b>Secretary</b>	Krishna Parekh	510-402-9146
<b>Membership</b>	Christine Jacklich	925-872-5875
<b>Events &amp; Marketing</b>	Kimberly de Mateo	925-895-6505

**Lisa Zarodney**

**President ,Valley Family Child Care Association of Alameda County.**

## VFCCA REGISTRATION FORM 2024-2025

### Contact Details

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Phone Number: Cell \_\_\_\_\_ Home Phone : \_\_\_\_\_

Email: \_\_\_\_\_

License Number: \_\_\_\_\_ Date of issue: \_\_\_\_\_ Referred By \_\_\_\_\_

Daycare type: Small      Large      Elementary School Near you: \_\_\_\_\_

### Social Media Information

Website: \_\_\_\_\_ Facebook ID: \_\_\_\_\_

WhatsApp Number: \_\_\_\_\_

### Daycare Information

Age group you serve(circle ): Infant      Toddler      School Age

Days of operation: \_\_\_\_\_ Hours of operation \_\_\_\_\_

If any changes are made to the above information, contact the VFCCA board to make the required changes .I \_\_\_\_\_ give permission to VFCCA to add my details on their website and all other social media sites and to post my pictures or videos on their website and other advertising material. I allow VFCCA to give my information to parents over the phone.

Name: \_\_\_\_\_ Signature \_\_\_\_\_

Date: \_\_\_\_\_ Payment Type Official use: Paypal vfcca19@gmail.com      Check# \_\_\_\_\_