



**COLORADO ASSOCIATION OF FAMILY CHILD CARE  
Website Information Form**

**TO:** Pam Ball  
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**From:** \_\_\_\_\_ **Office:** \_\_\_\_\_

**CAFCC Affiliate Name:** \_\_\_\_\_

**County:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Effective Date of Information:** \_\_\_\_\_

**Date to be deleted:** \_\_\_\_\_

**Check One:**

- I wish to update/change information currently posted on the CAFCC website
- I wish to post new information on the CAFCC website
- I wish to have posted information deleted from the CAFCC website

**The web page (s) I wish to update are:**

- Child Care Referrals
- Local Affiliate Membership
- Training
- Upcoming Meetings
- Other \_\_\_\_\_

**Information to be posted:**

1. Name of organization/affiliate \_\_\_\_\_

2. Contact person (Name, Title, & Phone Number) \_\_\_\_\_

3. Event (Workshop, Meeting, Conference) \_\_\_\_\_

Preregistration required? Choose one:  Yes  No Date Due \_\_\_\_\_

Directions (be as brief as possible) \_\_\_\_\_

**NOTE: PLEASE ALLOW 2 WEEKS FROM RECEIPT OF FORM FOR CHANGES AND ADDITIONS TO BE POSTED ON THE WEBSITE. THANK YOU.**

CAFCC Website Address: [www.coloradochildcare.com](http://www.coloradochildcare.com)