

Lancaster Family YMCA

THIRD PARTY SUBSIDY FORM (CCW, or Other) Child Care Works (CCW) makes it possible for low-income families to find reliable, quality child care near their home or work and provides financial assistance to help them afford it.

Mandatory Family Information

Parent's Name: _____

Name of child (ren) covered by Third Party subsidy:

1) _____ 2) _____ 3) _____

Address: _____

City _____ **State:** _____

Zip: _____ **County:** _____

Home Phone: _____ **Cell:** _____

Caseworker's Name: _____

Caseworker's Phone: _____ **Ext** _____

Name of Organization: _____

Address of Organization:

City, State, Zip, & County _____

Amount of Parent Co-pay: \$ _____

Parent's Name (Print): _____

Parent's Signature: _____ **Date:** _____