

**WSFCCA**

Washington State Family Child Care Association  
PRESIDENT/MEMBERSHIP  
(PRESIDENTA/MEMBRECIA)

Donna Horne  
1909-94th Dr. SE  
Everett, WA. 98205-3824

Non-Profit Org.  
U.S. POSTAGE  
**PAID**  
Permit #356  
Tacoma WA

2007-2008  
Membership  
Application

\*\*\*important provider information inside\*\*\*  
\*\*\*contiene informacion importante para proveedoras\*\*\*



Washington State Family Child Care Association  
(Asociacion de proveedores de niños en el Estado de Washington)

# MEMBERSHIP APPLICATION

*(Solicitud para hacerse Miembro)*

## 2007 - 2008

### INSURANCE *(Seguro)*

**\*Liability\*** *(Responsabilidad Civil)*

**\*Accident/Medical\*** *(Accidental/Medico)*

**\*Provider/Family Medical and Dental\***

*(Proveedores/ Familias-Medico/Dental)*



**“There’s no place like home, a family child care home.”**

*(Hogar solo hay uno, el hogar de cuidado infantil familiar)*



**Washington State Family Child Care Association** is a nationally respected, professional non profit organization of family home child care providers. The goal of the Association is to enhance and improve the quality of care provided to the children in Washington State.

The purpose of the Association is to educate, protect and give status to family child care providers. Through publications, meetings, training and networking, child care providers are kept informed of issues pertaining to child care. The Association is a means of bringing the concerns and voices of all providers together in order to share ideas, resources, and to problem solve. Each chapter reflects the diverse issues of the providers in that area. Check out our membership benefits and contact a chapter near you.

La Asociación (WSFCCA) es una organización profesional de proveedores de cuidado infantil familiar respetada en todo el país. La meta de la Asociación es mejorar el cuidado que se le da a los niños de Washington!

El proposito de la Asociación es educar, proteger y dar una mejor posición social a proveedores de cuidado infantil familiar. A través de sus publicaciones, reuniones talleres de entrenamiento y conexiones, esperamos informar a proveedoras de cuidado infantil de todos los temas pertinentes a nuestra profesión. La Asociación ofrece un medio para reunir y dar voz a las preocupaciones y perspectivas de todos los proveedores a fin de compartir ideas recursos y solucionar problemas! Cada Chapter refleja los diversos temas de los proveedores de esa zona. Revise los Beneficios a los Miembros y pongase en contacto con un Chapter cerca de Ud!

**APLICACIÓN PARA MEMBRESIA DE WSFCCA**

NOMBRE \_\_\_\_\_

DIRECCIÓN \_\_\_\_\_

CIUDAD \_\_\_\_\_

TELÉFONO \_\_\_\_\_

CORREO ELECTRÓNICO \_\_\_\_\_

**MARQUE UNO**

\_\_\_ MIEMBRO COMPLETO (proveedoras con licencia)

\_\_\_ MIEMBRO ASOCIADO (esposo/a, asistente, retirado)

\_\_\_ OTROS (proveedoras sin licencia, clientes)

**ESCOJA SU CHAPTER (grupo) fíjese en la lista.**

CHAPTER \_\_\_\_\_

COSTO DE CHAPTER \_\_\_\_\_

**SEGURO DE ACCIDENTE/MEDICO**

(no es seguro de responsabilidad a terceros)

\$50.00 POR AÑO HASTA 12 NIÑOS.

OCTUBRE 1, 2007 HASTA SEPTIEMBRE 30, 2008

COSTO POR CHAPTER \$ \_\_\_\_\_

SEGURO ACCIDENTE/MEDICO \$ \_\_\_\_\_

**TOTAL \$ \_\_\_\_\_**

\_\_\_\_\_ CHEQUE (\$40.00 de cargo por cheques sin fondo)

NUMERO DE CHEQUE \_\_\_\_\_

\_\_\_ TARJETA DE CRÉDITO/DÉBITO

NUMERO \_\_\_\_\_

VISA \_\_\_ MASTERCARD \_\_\_ FECHA VENCIMIENTO \_\_\_ / \_\_\_

FIRMA PARA TARJETA DE

CRÉDITO \_\_\_\_\_

ESCRIBA EL CHEQUE A WSFCCA Y ENVIÉLO A:

**WSFCCA/DONNA HORNE  
1909 94th DR. SE  
EVERETT, WASHINGTON  
98205**

# WSFCCA MEMBERSHIP APPLICATION

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_

## CHECK ONE:

FULL MEMBER (licensed provider)

All licensed providers are full members

ASSOCIATE MEMBER (spouse, assistant, retired)

AUXILARY (supporter)

## CHOOSE YOUR CHAPTER (SEE CHAPTER LIST, PAGE 5)

CHAPTER \_\_\_\_\_

DUES FOR THAT CHAPTER \$ \_\_\_\_\_

## ACCIDENTAL/MEDICAL INSURANCE

(THIS IS NOT LIABILITY INSURANCE)

\$50.00 PER YEAR FOR UP TO 12 CHILDREN

OCT. 1, 2007 - SEPT 30, 2008

CHAPTER DUES \$ \_\_\_\_\_

ACCIDENTAL/MEDICAL \$ \_\_\_\_\_

**TOTAL DUE \$ \_\_\_\_\_**

CHECK (40.00 CHARGE FOR NSF CHECKS)

CHECK NUMBER \_\_\_\_\_

CREDIT CARD NUMBER \_\_\_\_\_

VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SIGNATURE (C.CARD ONLY) \_\_\_\_\_

MAKE CHECKS PAYABLE TO WSFCCA and SEND TO:

**WSFCCA/DONNA HORNE  
1909 94<sup>TH</sup> DR SE  
EVERETT, WASHINGTON**

**98205**



## Membership benefits include:

Networking opportunities with other providers

Advocates working for provider rights

Representation within various child care advocacy groups

Quarterly Newsletters

Access to Group Health/dental

Supplemental Accidental/Medical Insurance for child care children

Monthly chapter meetings and quarterly state meetings

If you have questions please call:

Donna Horne 1-888-866-2555 or email: [dauna@aol.com](mailto:dauna@aol.com)

## BENEFICIOS

REAR CONEXIONES CON OTRAS PROVEEDORAS

TENER REPRESENTANTES QUE ABOGAN POR LOS DERECHOS DE LA PROVEEDORA

REPRESENTACION DENTRO DE GRUPOS QUE DA ABOGACIA PARA EL CUIDADO INFANTIL

FOLLETINES DE NOTICIAS TRIMESTRALES

ACCESO A SEGURO MEDICO/DENTAL

SUPLEMENTO DE SEGURO ACCIDENTE/MEDICO PARA LOS NINOS DE SU GUARDERIA

REUNIONES MENSUALES DE CHAPTERS Y TRIMESTRALES DE LA JUNTA DIRECTIVA.

SI TIENE PREGUNTAS POR FAVOR LLAME A:

MARIA CONSUELO LOPEZ 206-522-7646

[WSFCCAMCL@MSN.COM](mailto:WSFCCAMCL@MSN.COM)

# WSFCCA IMPORTANT NUMBERS

## PRESIDENT

DONNA HORNE, TEL: 1-888-866-2555

EMAIL: [dauna@aol.com](mailto:dauna@aol.com)

## VICE PRESIDENT

MARIA CONSUELO LOPEZ, TEL: 206-522-7646

EMAIL: [wsfcca@msn.com](mailto:wsfcca@msn.com)

## SECRETARY

LAVONNE COUNLEY, TEL: 425-355-7169

EMAIL: [grandmavon@yahoo.com](mailto:grandmavon@yahoo.com)

## TREASURER

JOAN AARTS, TEL: 360-754-0278

EMAIL: [aartsrags@yahoo.com](mailto:aartsrags@yahoo.com)

## PUBLIC POLICY

SUE WINN, TEL: 360-466-3077

EMAIL: [SWINN@fidalgo.net](mailto:SWINN@fidalgo.net)

## GROUP HEALTH/DENTAL

ELAINE HETTERLY, TEL: 253-833-2191

## FINANCIAL SERVICES/HEALTH/LIFE/LONG TERM CARE

CATHY McCLUSKEY, TEL: 206-372-7811

STARS (800) 727-3107 EXT.17

APRE 360-636-4289

CHILDCARE UNION, SEIU 1-877-734-8673

## WEBSITES

WASHINGTON STATE

FAMILY CHILD CARE ASSOCIATION [wsfcca.org](http://wsfcca.org)

NATIONAL FAMILY CHILD CARE ASSOCIATION [nafcc.org](http://nafcc.org)

DEPARTMENT OF EARLY LEARNING [www.del.wa.gov](http://www.del.wa.gov)

# WSFCCA LOCAL CHAPTERS

**LOCAL CHAPTERS** are run locally by licensed family home child care providers from each geographic region. They are professional support groups which reflect the personalities of their areas and members, and address issues directly related to their regions.

**BENTON-FRANKLIN** Samantha 509-942-0234 Annual Dues: \$65

**SNOHOMISH** Amber 360-659-2226 Annual Dues: \$70

**CLARK COUNTY** Judy 360-693-5245 Annual Dues: \$60

**PIERCE** Roberta 253-565-1683 Annual Dues: \$75

**PIERCE UNITED** Cathy 253-864-8932

**SOUTH SNOHOMISH** Christine 425-774-9439 Annual Dues: \$70

**COWLITZ** Sandi 360-636-4289

**SKY VALLEY** Jeni 360-799-1282 Annual Dues: \$70

**EDUCADORAS HISPANAS** Maria 253-630-9472 Annual Dues: \$70

**PROVEEDORAS UNIDAS** Bertha Ramirez 509-546-0623 Annual Dues: \$65

**THURSTON** Carol 360-943-6858 Annual Dues: \$60

**GRAYS HARBOR** Linda 360-289-9238 Annual Dues: \$65

**SKAGIT** Amber 360-826-4039 Annual Dues: \$60

**WHATCOM** Kelly 360-671-4024 Annual Dues: \$60

**NORTH KING** Maria 209-522-7646 Annual Dues: \$70

**NORTH SNOHOMISH** Lisa Ogden 360-653-7597 Annual Dues: \$65

**Non-Chapters** Donna Horne 1-888-866-2555 Dues: \$60

**SOUTHWEST KING** Vickie 206-878-9630 Annual Dues: \$65