

Naples Alliance for Children Resource Directory Information. Information obtained for the NAFC directory will never be distributed to others without prior permission.

NAFC RESOURCE DIRECTORY EARLY CHILDHOOD CENTER APPLICATION

PLEASE PROVIDE COMPLETE INFORMATION FOR YOUR EARLY CHILDHOOD EDUCATION CENTER

AFTERSCHOOL INFORMATION SHOULD BE LISTED ON SEPARATE FORM PROVIDED

IF WE DO NOT RECEIVE YOUR REPLY YOUR CENTER WILL BE LISTED WITH NAME AND ADDRESS ONLY.

Please **PRINT** of **TYPE** (Use additional paper if necessary)

Name of Center _____

Name of Owner _____

Director: _____

Address _____

City _____ **State** _____ **Zip** _____

Phone Number(s) _____ **Fax** _____

E-mail _____

Internet Home Page http:// _____

Florida State License # _____ **Accreditation Group**

Other # _____ **Licensing Group** _____

Open Year Round: yes ____ no ____ **Hours:** _____

AGES: _____