



YMCA CHILDCARE RESOURCE SERVICE

**ALTERNATIVE PAYMENT PROGRAM
PROVIDER CHANGE OF ADDRESS FORM**

PROVIDER NAME (please print): _____

CENTER NAME (if applicable): _____

OLD ADDRESS: _____

NEW ADDRESS: _____

NEW PHONE NUMBER: _____

CA ID/DL Number: _____

(Exempt License Providers)

NEW E-MAIL ADDRESS: _____

EFFECTIVE DATE OF THIS CHANGE: _____

CONTACT PERSON: _____

SIGNATURE: _____ DATE: _____

Attention: ALL Providers are required to submit a W9 form with the change of address form. **Licensed Child Care Providers** are required to submit a copy of their new daycare license showing new address. If daycare license is not available, provider status will change to Exempt-License.

Exempt Providers are required to attach proof of address. (Mortgage statement or utility bill in your name, no exceptions.) YMCA CRS reserves the right to request additional supporting documentation for proof of address.

Exempt-licensed Providers registered with the TrustLine Registry, your address will be forwarded to TrustLine at the address listed below as required by law.

TrustLine Registry: Community Care Licensing
California Department of Social Services
744 P Street, M.S. 19-57
Sacramento, CA 95814