



## Association of Christian Childcare Administrators Membership Form

700 E. 4th Street  
Sand Springs, OK 74063  
office@accakids.org

Date: \_\_\_\_\_

Name of applicant: \_\_\_\_\_

Agency: \_\_\_\_\_

How long have you been employed by this agency? \_\_\_\_\_

Position: \_\_\_\_\_ Is the CEO of this agency a member of ACCA? \_\_\_\_\_

Agency address: \_\_\_\_\_

City/ state/ zip: \_\_\_\_\_ Agency phone: \_\_\_\_\_

Cell phone (optional): \_\_\_\_\_

Email address: \_\_\_\_\_

Is agency sponsored by: (church, denomination, civic organization, other, etc.)?  
\_\_\_\_\_

Is the agency a 501 (c) 3? \_\_\_\_\_

Do you occupy a full-time paid executive or administrative position with planning and  
policy-making responsibilities? \_\_\_\_\_

### MEMBER FEES:

**Individual Membership Fee - \$200**

**Non-Affiliate Corporate Fee - \$500**

**Non-Affiliate Individual Fee - \$250**

Referred by: \_\_\_\_\_