CHILDCARE REIMBURSEMENT FORM

COMMUNITY groups

CHILDCARE Reimbursements are offered to parents or guardians attending Grouplife meetings during which they paid someone to care for their child/children. We ask that this be used only when you would incur expenses for childcare, if you were paying the fees.

An individual form is to be filled out for each applicable meeting. For reimbursement, forms must be turned in at least once per month, no more than 30 days past the date of payment.

YOUR INFORMATION:

Name _____ Phone # _____

Address _____ City _____ Zip Code _____

Group Leader Name _____ Name of Study _____

☐ NUMBER OF CHILDREN ☐ NUMBER OF HOURS ☐ AMOUNT REQUESTED

RECORD OF FUNDS THAT YOU PAID:

$ _____ (total that you paid) to _____ (person that you paid) for _____ (date of meeting) Phone # _____ (for childcare provider)

Address of sitter _____ City _____ Zip _____

REIMBURSEMENT PAYABLE TO:

Sometimes the church pays you and sometime checks are issued directly to the sitter. In this instance, the check should be issued to... ☐ the Sitter, they are due payment ☐ Me, I already paid the sitter

Signature _____ Date _____

Forms can be mailed to Crossroads Community Church, 1454 S. State Rt. 44 Hwy., Jersey Shore, PA 17740 or be dropped off at the Information Table on Sundays.

MAXIMUM REIMBURSEMENT CHART

	HOURS OF EVENT				
Number of Children	1	2	2 ½	3	4
1	$5.00	$10.00	$12.50	$15.00	$20.00
2	$8.00	$16.00	$20.00	$24.00	$32.00
3	$10.00	$20.00	$25.00	$30.00	$40.00
4 or more	$12.00	$24.00	$30.00	$36.00	$48.00

Life is better connected.

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