



Reimbursement Payable to:

Name _____

Address _____

City _____ State _____ Zip _____

Name of Small Group _____

Reimbursement Chart			
# of Children	1-5	6-10	+10
Reimbursement (2.5 hours is maximum reimbursement)	1 babysitter @ \$10 per hour \$25 total	2 babysitters @ \$10 per hour \$50 total	Contact Ashley aeverett@fbctifton.org

	Date	# of Children	Reimbursement Amount
Small Group Meeting			
Small Group Meeting			
Small Group Meeting			
Small Group Meeting			
Small Group Meeting			

Reimbursement for groups meeting when FBC on campus childcare is not available.

Please fill out one per month. Form must be submitted within 60 days of last meeting. No reimbursement is provided for any week the group does not meet or when there is a scheduled FBC Small Group Break

Please submit this form to Ashley Everett or email to:
aeverett@fbctifton.org