

MCC Community Group Outside Use Childcare Benevolence Individual Request

| Payable To: | | | | | |
|-----------------------------|--------------------------|------------------|--------------------|----------------------------|---------------|
| News | | | | | |
| Name: | | | | | |
| | | | | | |
| Group Leader | | | | | |
| Name: | | | | | |
| | | | | | |
| | | | | | |
| Date of Meeting | Number of Sitters | Number of Kids | Number of Hours | Hourly Rate (\$10/Hour) | Total |
| Ex: 1/10/17 | 1 | 3 | 2 | \$10/Hr | \$20 |
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| By signing below, I hereb | w cortify to Millerook (| Community Church | that the cost | of childcaro is an o | hstaclo to my |
| ability to participate in m | | | | | - |
| oe a financial hardship to | my family. I understa | _ | | | |
| nformation to verify the | se statements. | | | | |
| | | | | | |
| Signature: | | | Date: | | |

Please turn this form back to Gen Marcy or to her email gen@millcreek.org within 10-14 days of the first date of childcare on the form.

| For Office Use Only: | | | | |
|---------------------------------|---------------------|--|--|--|
| Application Approved: | Application Denied: | | | |
| If denied, please give reason: | | | | |
| Signature of Authorized Person: | Date: | | | |
| Title: | | | | |