Rural Municipality of Clyde River
PO Box 644, Cornwall, PE C0A 1H0
www.clyderiverpei.com

Recreation Reimbursement Form -2020 / 2021

Name of Applicant / Parent :_____

Civic Address : _____

Name of Participating Child:

1. _____
2. _____
3. _____

Sport / Activity: & Date Enrolled:

1. _____
2. _____
3. _____

Please attach payment receipt(s) or email copy to:
administrator@clyderiverpei.com

Payment cheque will be mailed to applicant address listed above

Note: Reimbursements calculated at $ 30.00 / activity / child to a maximum of $60 / child
Child must be 18 yrs or younger and resident of municipality.

TOTAL REIMBURSEMENT APPROVED

$ _____

Applicant Signature Date

CAO Signature Date