

Recreation Reimbursement Form 2021 / 2022

Name of Applicant / Parent :				
Civic Address :	_			
Name of Participating Child: 1.				
2				
3				
Sport / Activity: & Date Enrolled:				
1	<u> </u>			
2	<u> </u>			
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 \$ 60.00 / activity / child to Child must be 18 yrs or younger and resident of municip	a maximum of \$120 / child			
, <u>TO</u> \$	TAL REIMBURSEMENT APPROVED			
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Applicant Signature	Date	CAO Signature	Date