

# MERCY HILL CHURCH CHILD CARE REIMBURSEMENT FORM

Name: \_\_\_\_\_

Community Group: \_\_\_\_\_

Monthly Total: \$ \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Dates and cost of child care for the month:

Date:	# of children:	# of sitters:	Weekly Total:

\_\_\_\_\_  
(Your Signature)

\_\_\_\_\_  
(Community Group Leaders Signature)

Mercy Hill will reimburse \$10 per hour for each babysitter that is needed for a Community Group (with a maximum of 2 hours per night). Below are the suggested ratios for the number of babysitters per kids.

<b>Number of Child Care Providers</b>
1 Childcare Provider (1-4 kids): 1 Childcare Provider for 2 hours would be a reimbursement total of \$20
2 Childcare Providers (5+ kids): 2 Childcare Providers for 2 hours would be a reimbursement total of \$40

**\*All completed child care reimbursement forms must be submitted online to [mercyhillchurch@bill.com](mailto:mercyhillchurch@bill.com) by the last day of the month. Forms filled out more than 30 days after the final day of the preceding month will not be accepted.**