



**MCC Community Group**  
**Outside Use Childcare Benevolence Individual Request**

**Payable To:**

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

Group Leader  
Name: \_\_\_\_\_

Date of Meeting	Number of Sitters	Number of Kids	Number of Hours	Hourly Rate (\$10/Hour)	Total
<i>Ex: 1/10/17</i>	<i>1</i>	<i>3</i>	<i>2</i>	<i>\$10/Hr</i>	<i>\$20</i>

By signing below, I hereby certify to Millcreek Community Church that the cost of childcare is an obstacle to my ability to participate in my Community Group Meeting and without this assistance the cost of childcare would be a financial hardship to my family. I understand that the Millcreek Community Church may request additional information to verify these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please turn this form back to Cindy Salisbury or to her email [cindys@millcreek.org](mailto:cindys@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 \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Person:

Title: \_\_\_\_\_