

## **Traditional Home Education Reimbursement Form**

Christ the Redeemer Catholic Schools

## PLEASE PRINT CLEARLY

| Parent Name(s):   |   | Address:                     |                        |  |  |  |
|---|---|------------------------------|------------------------|--|--|--|
| Student Name(s):  |   | City/Town:                   |                        |  |  |  |
|   |   | Postal Code:                 |                        |  |  |  |
|   | 1   | Phone Number:                |                        |  |  |  |
|   |   | Email:                       |                        |  |  |  |
| Before mailin   |   | following has been           | done:                  |  |  |  |
| <ul> <li>Clearly print all information. (We encourage you to use the fillable PDF version of this form<br/>available on our school website.)</li> </ul> |   |                              |                        |  |  |  |
| <ul> <li><u>ITEMIZED ORIGINAL</u> receipts are included. (Photocopied receipts can be accepted for<br/>warranty items ONLY.)</li> </ul>                 |   |                              |                        |  |  |  |
| You have taken copies of receipts and the reimbursement form for your records.  |   |                              |                        |  |  |  |
| Vendor  | Description<br>(item or service)  | Related Course<br>(eg. Math) | CAN. \$<br>(incl. GST) |  |  |  |
|   |   |                              |                        |  |  |  |
|   |   |                              |                        |  |  |  |
|   |   |                              |                        |  |  |  |
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|   |   |                              |                        |  |  |  |
|   |   |                              |                        |  |  |  |
|   |   |                              |                        |  |  |  |
|   |   |                              |                        |  |  |  |
|   |   |                              |                        |  |  |  |
| Please MAIL completed form and original receipts to: The Centre for Learning@HOME, Box 137, Okotoks, AB T1S 1A4  TOTAL                                  |   |                              |                        |  |  |  |
|   | If you wish to claim the exchange rate for foreign currency purchases, please include a copy of the |                              |                        |  |  |  |

If you wish to claim the exchange rate for foreign currency purchases, please include a copy of the credit card or bank statement showing the exchange rate used at the time of processing.

|                  | <u> </u> | <u> </u> | • | <u> </u> |
|------------------|----------|----------|---|----------|
| Office use only: |          |          |   |          |
|                  |          |          |   |          |
|                  |          |          |   |          |
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