



Affordable Child Care Benefit Full Day Claim for Children Enrolled in School – Days Not in Session

Registered Licence-Not-Required Licence-Not-Required In-Child's-Own-Home

Collection of personal information by the Ministry of Education and Child Care on this form under the authority of the Freedom of Information and Protection of Privacy Act s. 26(c) and the Child Care Subsidy Act s. 5 is for the purpose of facilitating delivery of services, identification, and client centred information management across social programs. If you have any questions about the collection, use or disclosure of this information, please call the Child Care Service Centre at 1 888 338-6622 or inquire in writing to the address noted below.

Office Use Only

- Use this form to claim for full days for spring, summer or winter breaks.
• Provide the School District number (if applicable) and name of the school the child attends.
• Submit a separate form for each parent's children.
• Do not submit this form until after the 25th of the month being claimed.
• For more information, refer to the website at gov.bc.ca/affordablechildcarebenefit.

Payee Name Supplier Number Claim Month Claim Year

Claim Information

Table with 6 columns: Case ID, Last Name, Authorized Children (First Name), Dates, School District number, Name of School

Comments

Comments text area

Child Care Provider Declaration

I confirm this is a true account of the number of full days of child care provided for the month claimed.

Child Care Provider's Signature Date Signed (YYYY-MMM-DD)

Parent Declaration

I confirm this is a true account of the number of full days of child care provided for the month claimed.

Parent's Signature Date Signed (YYYY-MMM-DD)

Once completed, please fax or mail to the Child Care Service Centre. Keep a copy for your records.

Mailing Address PO Box 9953 Stn Prov Govt Victoria BC V8W 9R3

Toll Free Fax 1-877-544-0699 Toll Free Phone 1-888-338-6622 Website gov.bc.ca/affordablechildcarebenefit