

# Standard First Aid/CPR Level "C" Training

## Federation of Foster Families of Nova Scotia

### Participant Expenses Sheet

Date(s) of Workshop: \_\_\_\_\_ Location: \_\_\_\_\_

Your name (s): \_\_\_\_\_

Your mailing address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\*Please complete Child Care portion on reverse of this form.

Date (List each day separately)	Kilometres Travelled	Mileage (\$0.5932/km) Multiply km x mileage rate	Lunch (\$15.00 per person)	Child Care (bring forward from back of this form)	Total
<b>Totals:</b>					

Signature of Participant: \_\_\_\_\_

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

Please complete and forward this form to:  
**Training Program**  
 c/o Federation of Foster Families of Nova Scotia  
 99 Wyse Road, Suite 350  
 Dartmouth, NS B3A 4S5

## Babysitting Claim

Number of Child(ren)-in-Care submitting for: \_\_\_\_\_

Number of Biological/Adoptive Child(ren) submitting for: \_\_\_\_\_

Date	From (a.m. or p.m.)	To (a.m. or p.m.)	Number of Hours	\$10.60/hour 1 <sup>st</sup> child. \$4.00/hour additional children/youth/adult

Your Signature: \_\_\_\_\_

**Children, youth and or dependent adults who cannot be left unattended:**

- \$10.60 per hour for the first child.
- \$4 per hour for each additional child.
- There shall be a limit of 2 full days (48 hours max).