

CHILDCARE VOUCHERS REDEMPTION FORM

Child's name _____
 Parent's name _____
 School _____

Childcare Voucher Company

Accor	<input type="checkbox"/>	Kids Unlimited	<input type="checkbox"/>
All Save	<input type="checkbox"/>	Kiddivouchers	<input type="checkbox"/>
Busy Bees	<input type="checkbox"/>	Leapfrog	<input type="checkbox"/>
Care4	<input type="checkbox"/>	Sodexo Pass	<input type="checkbox"/>
Fair Care	<input type="checkbox"/>		
Other	<input type="checkbox"/>		

Name _____

Details of voucher(s)

Paper voucher Number of vouchers redeemed x

£
£
£

Electronic voucher Reference _____

Total amount

Dates covered by voucher payment _____ to _____

Signature _____ Date _____

FOR OFFICE USE

Action	Reference	Who	Date
Received in club			
Redeemed	Phone / email / post / online		
Remittance received			
In accounts			
On bank statement			
Payment records updated			