Travel & Accommodation Assistance Form

PLEASE READ THIS INFORMATION BEFORE APPLYING

- The Community Restorative Centre (CRC) may be able to provide some assistance to you to help meet the cost of visiting a person incarcerated in a NSW Correctional Centre.
- You may be eligible for a contribution towards some of the travel and accommodation costs related to **one visit per incarcerated person every 12 weeks**

Travel & Accommodation Assistance has been funded by Corrective Services NSW.

CRC has limited funding for this program and tries to support as many families as possible with the resources available. We continue to apply for further funding grants and will send a letter or email to current clients to let them know when funds are low.

Are You Eligible?

You are a member of the incarcerated person's immediate family, support network or have a kinship relationship.
You are experiencing financial hardship
Your loved one is in a NSW correctional facility
You live over 100km from the correctional centre
You haven't claimed assistance for a visit made in the last 12 weeks
You are aged 18 or older
Your visit is for the purpose of maintaining contact or for taking your loved one out during day or weekend leave

What Can You Claim?

- Train/bus tickets within NSW, or assistance with fuel costs based on $12 per 100km of direct travel between a NSW address and the correctional centre. CRC will calculate the distance in kilometers using mapping software. Please submit tax receipts showing that you purchased the fuel used for this journey within a week of the travel dates.
- Taxi fares directly to and from the train/bus station closest to the correctional centre you are visiting only where public transport isn't available and there is no suitable alternative. Please ask the driver for an official tax receipt for the taxi fare.
- One night's accommodation (maximum $150/night) will be contributed where the time taken to travel to the correctional centre (one way) is 3 hours or more according to Google Maps.

Please call CRC to discuss any special circumstances or questions you may have.

251 Canterbury Road
Canterbury NSW 2193

postal address
PO Box 258
Canterbury NSW 2193

phone (02) **9288 8700**
fax (02) 9211 6518
email info@crcnsw.org.au

Travel & Accommodation Assistance Form

How to Apply

- Please complete all fields in the following application and return within 30 days of your visit.
- Please attach the following:
  - Clear copies of all original tax receipts to verify travel (please keep originals)
  - Clear copies of all original tax invoices to verify accommodation (please keep originals)
- Assistance can be provided for ONE (1) visit every 12 weeks for each person you are visiting
- **Please note, this contribution cannot be made without proper tax receipts, NOT debit or credit card receipts.** Tax receipts include the name of the business, their ABN, the date and a list of what you purchased.

How Money will be Paid to You

- Funds will be paid via electronic funds transfer (EFT) into your nominated bank account within 28 days of receipt of your application. The bank account must be in the name of the claimant.
- Please check that you have clearly entered the correct banking details including BSB, account number and account name.

Important

- Please fill in all sections of the application form
- If you are unable to travel as often as you'd like or can't travel at all, it may be possible for you to have a Family Video Contact visit via a video link if available. For further information on Family Video Contact, please contact the correctional centre directly or see the Corrective Services NSW website
- For more copies of this application form please contact CRC or visit our website at www.crcnsw.org.au.

NB: As a requirement of the funding and for verification and statistics purposes, some of your information on the application form is shared with Corrective Services NSW – this includes details of the claim, the date of your visit, number of visitors, cultural background of visitors and MIN of the incarcerated person. Please send your completed application form and attached receipts to:

POST YOUR COMPLETED APPLICATION FORM, RECEIPTS AND INVOICES TO:
Community Restorative Centre PO Box 258 Canterbury NSW 2193
or EMAIL YOUR COMPLETED APPLICATION FORM, RECEIPTS AND INVOICES TO:
info@crcnsw.org.au

Applications will only be considered within 30 days of visit and will only be approved and processed if eligibility criteria are met and tax invoices/tax receipts are presented.
Please allow 28 days for processing.
For further information and enquiries phone CRC on (02) 9288 8700.
This form is to be completed by the applicant who intends to receive our contribution
Please complete ALL boxes to avoid delays in the processing of your claim.

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PLEASE READ THE ATTACHED INFORMATION SHEET FIRST

Are you eligible? *You must meet the following criteria:*

	Please circle
You are a member of the incarcerated person's immediate family, support network, a friend or have a kinship relationship	☐ Yes ☐ No
You are in receipt of a Centrelink benefit or experiencing similar financial hardship	☐ Yes ☐ No
The person you have visited is in a NSW correctional facility	☐ Yes ☐ No
You live 100km or more from the correctional centre **OR** you have contacted CRC about your particular circumstances	☐ Yes ☐ No
Your last claim for assistance was at least 12 weeks ago (or not applicable)	☐ Yes ☐ No
You are 18 years or older	☐ Yes ☐ No
Purpose of visit	☐ family visit **OR** ☐ day/weekend leave

If claiming for accommodation:

The time taken to travel to the correctional centre (one way) is 3 hours or more according to Google maps **OR** you have contacted CRC about your circumstances	☐ Yes ☐ No

Your details (person claiming contribution):

Name of Applicant:	
No./Street:	
Suburb:	Postcode:
Telephone Number: Home:	Mobile:
Email Address:	
Date of Birth [DD/MM/YYYY]:	Gender:

Visit details:

Name of Incarcerated Person Visited:
MIN:
Incarcerated Person's date of birth [DD/MM/YYYY]:
Relationship / Kinship to Incarcerated Person:
Address travelled from:
Correctional Centre Visited:
Date of Visit [DD/MM/YYYY]:

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Details of additional visitors travelling with you:

Name	Date of Birth [DD/MM/YYYY]	Gender	Relationship to inmate

The following questions are used for statistical purposes only:

Please indicate if you or any of your additional visitors:	
Identify as Aboriginal or Torres Strait Islander?	☐ Yes ☐ No
Were born outside of Australia – English speaking?	☐ Yes ☐ No
Were born outside of Australia – non-English speaking?	☐ Yes ☐ No

Type of assistance applied for:

Details of Contribution Requested:	Bus Fare	Train Fare	Taxi Fare	Mileage	Accommodation
Tick each that apply	☐	☐	☐	☐	☐
Amount of fare/accommodation	$	$	$	We will calculate this	$
Tick to indicate copies of tax receipts have been provided	☐	☐	☐	☐	☐

Account details for Electronic Funds Transfer (EFT)

Account name:	Bank:
BSB (6 digits): __ __ __ __ __ __	Account number:

** Account must be in the name of the person claiming the contribution*

Applicant's Signature:	**Date** [DD/MM/YYYY]**:**

OFFICE USE ONLY:

Mileage calculation:	_____ KMs x 2 = _____ @ $12 per 100 KM = _____	
Amount Approved:	FARES: $ ACCOMM: $ MILEAGE: $ TOTAL: $	
Receipts Supplied:	FARES ☐ ACCOMM: ☐ FUEL: ☐	
Processed By:		*Date [DD/MM/YYYY]:*

Info and application form updated 17/07/2026