



NY/NE Regional & Local Work & Family Committee

2026 Summer Camp Program

One Step Summer Enrollment

June 14 - August 29, 2026

Eligible Employees

- CWA NY/NE
- IBEW 2213
- NY Management

Want an Application?

Go to: www.regionalwfrc.com

- Click on 2026 Summer Camp Application
- Complete Application & Reimbursement forms
- Email completed application & all required documents to: verizon.benefits.team@verizon.com
- Applications must be emailed no later than Friday, September 11, 2026 - No exceptions!
- Payout 11/20/26.



What is the Summer Camp Program?

The 2026 Summer Camp includes summer day programs as well as overnight camp programs and is made available through the Local and NY/NE Regional Work & Family Committees.

The fund will reimburse maximum of \$1,000 per family for summer camp expenses. (Maximum \$500 per child)

Employees who participate in the Dependent Care Reimbursement Fund (DCRF) during the school year can either continue to receive childcare reimbursements for their regular Dependent Care Expenses or if they wish they may enroll their child in a summer camp program.

Employees are prohibited from participating in both programs concurrently.

Verizon Corp and CWA NYNE/IBEW Local 2213 reserve all rights to alter or modify all eligibility requirements for this "program" or any other "Work and Family reimbursement programs", including but not limited to the amount(s) paid for the reimbursement, eligibility of applicants, proof of payment and all other provisions of this "program" or any other "Work and Family reimbursement programs", including the decision to discontinue this "program" or any other "Work and Family reimbursement program" at any time.

2026 SUMMER CAMP ANNOUNCEMENT

What you need to know:

- No annual income cap.
- Eligible age group 3 years but not yet 16 years of age.
- Dependents over the age of 16 with special needs or those who have been physically or medically diagnosed unable to care for themselves; who will be attending Summer Camp Programs in 2026 are eligible for enrollment.
- **Reimbursement up \$1,000 total per family.**
 - **Maximum \$500 per child**
- If married, employee and spouse must be employed at the time the children are enrolled in camp.
- All payments must be made by a Verizon employee.

2026 Tax Requirements and Implications:

- Dependents must be listed on employee's 2025 IRS 1040 Form in order to be eligible for enrollment.
- W-2 for employee and spouse (if married)
- Self-employed spouse must submit proof of employment: (i.e. IRS Tax Form Schedule C.)
- Submit page one & two of only 2025 IRS 1040 Form - Be sure to remove all social security number(s). Do not remove income figures
- Employees who are married, but filing separately, must submit their spouse's 2025 IRS 1040 Form.
- Employee's dependent children 3 years of age but not yet 13, will not be taxed.
- Employee's dependent children 13 years of age but not yet 16, will be taxed.

- Sleep away Camp is taxable regardless of age.
- Employees must be in need of dependent care in order to work. Under federal law, employees and their spouse must be working during the hours their dependents are in care in order to make this a "tax-free" benefit. See IRS publication 503 for detailed information.
- Check with your tax preparer for your tax obligations.

How do I know if my paperwork was received?

- Save your email - it will act as verification of date/time submitted as well as what was sent.

When will employees be reimbursed?

- Reimbursement of expenses are paid after the employee has incurred and paid their dependents summer camp expense.
- Reimbursement will show in associates and management paychecks November 20, 2026.

If your reimbursement is denied, you must appeal denial in writing within 45 days of notification of denial.

Please:

- **keep a copy of all information submitted until payout is complete**
- **write "summer camp" on the subject line of your email**



2026 Summer Camp / Summer Program Enrollment Application

IBEW 2213 / CWA / Verizon NY/NE Work Family Committee

Complete ALL information. Please print clearly or type. (Please do not use RED ink)

Name _____ Employee ID # _____

I am (check one) CWA Local Number _____ IBEW 2213 Management

Home Address _____

City _____ State _____ Zip Code _____

Work Address _____ NCSID _____

City _____ State _____ Zip Code _____

Work Phone _____ Cell Phone _____

E-mail _____ Marital Status (circle one) Single Married Divorced

Do you participate in the Dependent Care Reimbursement Fund (DCRF)? (circle one) Yes No

If YES, please provide name of your dependent. _____

How many children are you requesting summer camp reimbursement for _____ ?

(*note: a request for reimbursement form should be filled out for each child.)

~ You CANNOT participate in both DCRF and Summer Camp at the same time! ~

Employee Authorization:

I, (Print Name) _____ have read the 2026 Summer Camp Program rules and agree to abide by them. By signing and submitting this application, I certify the information I have provided is true and accurate. I understand that supplying false information may jeopardize my participation in the Summer Camp Program.

Applications must be emailed no later than Friday, September 11, 2026 - No exceptions!

Email application to: verizon.benefits.team@verizon.com

Please put "Summer Camp" in the Subject Field!

Employee Signature (original) _____ Date: _____

2026 Request for Summer Camp / Summer Program Reimbursement

COMPLETE ONE REIMBURSEMENT FORM PER CHILD PER CAMP

Employee Name _____ Employee ID # _____

Name of Dependent _____ DOB _____ Age _____

Type of Summer Camp (Circle one) Summer Day Summer Over Night Camp

Camp Name _____ Camp Tax ID # _____

Camp Address _____

Camp Phone Number _____ Start Date _____ End Date _____

Amount Paid for Camp: (not to exceed **\$1,000 per family** and **\$500 per child**) \$ _____

Camp Director Authorization: Print Name: _____ Date _____

Camp Director Signature _____

(must be original signature - stamped or faxed signatures will not be accepted)

Note: If your child attended more than one camp, **you must submit a "Request for Reimbursement" for each camp.**

To ensure prompt payment the following must be submitted with this form:

- 2025 - W2 (self and spouse)
- 2025 - IRS 1040 Form (self and spouse)
- Completed application
- Completed reimbursement form
- Proof of Payment in Verizon Employee name

Noted below are the only acceptable proof of payment:

- ACH payment receipt
- Cancelled Check (front and back)
- Credit Card receipt
- Venmo / Zelle

You MUST provide original receipt from the camp, website information, camp flyer as well as a phone number for committee to call for verification

Application, Tax documents, Request for Reimbursement and Proof of Payment must ALL be submitted AT THE SAME TIME and must be emailed no later than Friday, September 11, 2026.

Incomplete information will not be processed.

If you have any questions, please contact your Local Work and Family Committee Member
a list is provided for you @ www.regionalwfrc.com