## ATHLETE TRAVEL FUND APPLICATION FOR REIMBURSEMENT

NAME	CLUB			
ADDRESS	PHONE			
CITY	STAT	Е	ZIP	
MEET	LOCATIO	DN		
MEET DATES	_ TRAVEL DA	TES		
Events in which you competed				
To qualify for reimbursement, prior to this meet you mu event that meets the current USA Swimming Winter Jun				in an individual
Jr. National Qualifying Event:	Time Achieved:			
<b>NOTE:</b> Only one meet per short course (meets in September reimbursable. See Athlete Travel Fund Information sheet for			son (meets in Apr	il – August) is
<b>EXPENSES:</b> Show your expenses in each category. Attach is NOT necessary to forward receipts for meals. Please break				transportation. It
TRAVEL: Air/Bus/Other: \$				
TRANSPORTATION AT MEET: Car Rental:				
# Of Persons sharing	Share of ca	r rental		
LODGINGS: Share of room expenses: \$	MEALS	: \$		-
TIME TRIALS & OTHER INCIDENTALS: \$				
List items and amounts				
<b>REIMBURSEMENTS:</b> (do not include travel advance from	n your club):		CON	
		\$	Y	Your Swim Club
		\$		Other
TOTAL EXPENDITURES (LESS ANY REIMBURSEM	IENTS) \$_			
Signed:				
Signed:(Athlete - required)		(P	arent - required)	
Date:				
Complete form and attach receipts and send to TREASURE deadlines and formula included in the Travel Reimbursement				

deadlines and formula included in the Travel Reimbursement Criteria on the Virginia Swimming website. (This form is can be completed on a computer, saved, and attached to an email. If using a Mac, please select 'Print' then 'Save as PDF' before attaching.)

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