

ATHLETE TRAVEL FUND APPLICATION FOR REIMBURSEMENT

NAME _____ CLUB _____

ADDRESS _____ PHONE _____

CITY _____ STATE _____ ZIP _____

MEET _____ LOCATION _____

MEET DATES _____ TRAVEL DATES _____

Events in which you competed _____

Expenses: Show your expenses in each category. Attach original receipts for travel, lodging, and local transportation. It is NOT necessary to forward receipts for meals. Please breakdown costs for shared expenses.

TRAVEL: Air/Bus/Other: \$ _____

TRANSPORTATION AT MEET: Car Rental: \$ _____

Of Persons sharing _____ Share of car rental _____

LODGINGS: Share of room expenses: \$ _____

MEALS: \$ _____

TIME TRIALS & OTHER INCIDENTALS: \$ _____

List items and amounts _____

Reimbursements: (do not include travel advance from your club)

\$ _____ CONOCO/PHILLIPS

\$ _____ Your Swim Club

\$ _____ Other

TOTAL EXPENDITURES (LESS ANY REIMBURSEMENTS) \$ _____

Signed: _____
(Athlete - required) (Parent - required)

Date: _____

Complete form and attach receipts and send to TREASURER OF VIRGINIA SWIMMING. Please note 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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