



Florida Gold Coast Swimming

951 US Hwy. #1
North Palm Beach, FL 33408
561-691-3427 Ofc 561-626-5109 Fax NPBCoach4@aol.com

2012 - NATIONAL TRAVEL REIMBURSEMENT – APPLICATION for INDIVIDUAL SWIMMER

Swimmer's Name: _____ Club Code: _____

Street : _____

City: _____ State: _____ Zip: _____

I understand I must have held continuous FGC Swimming Registration (excluding collegiate participation) for 12 months to received 50% allowance; 24 months for 75% allowance and 36 months for 100% allowance. This request must be received with all related receipts on or before December 20th. Late or incomplete applications will not be considered.

Requesting funds for participation in:

- USA-S Olympic Trials - Omaha
- USA-S Jr. National Champs – Texas/Indianapolis
- NCSA Jr. Nationals - Orlando
- USA-S National Select Camps
- US Open Swimming Championships - Indianapolis
- Other or Nat'l Development – Name & Location of Meet: _____

<p><u>Individual Events Entered:</u> (Minimum one)</p> <p>_____</p> <p>_____</p>

Expenses: (you **must attach receipts or copies of receipts** for which you want reimbursement)

Mode of Travel _____	Travel \$ _____
	Meals \$ _____
_____ # of nights @ \$ _____	Motel \$ _____
	Total Expenses. \$ _____

Reimbursement received from all other sources (USA Swimming, Phillips 66, business/civic organizations or another sponsor). This does not include immediate family support.

Source (describe) _____ \$ _____

Total Amount of Reimbursement Requested: \$ _____

(Checks are payable to FGC Clubs only – Unless Individual is registered unattached)

Signature of Club Coach or Other(title)

Date

Return to: Richard Cavanah, Treasurer
951 U.S. Hwy. #1
North Palm Beach, FL 33408