



PACIFIC SWIMMING

Application for Pacific Swimming Travel Reimbursement - 2010 Meets

Requests for reimbursement must be postmarked within 60 days following the last date of the meet.

* Please refer to Pacific Swimming Rules & Regulations - Section 9.C. for Eligibility *

* Complete a separate application for each swimmer each meet*, receipts can cover more than one athlete.

Changes Adopted by Executive Committee Vote - July 20, 2010

Print Swimmer's Name:

Swimmer's Address:

City: State: Zip:

Did you swim for a college team in 2009 and/or 2010? YES or NO USA Swimming Registration Number:

If YES, Indicate LSC & CLUB registration during senior year in high school. LSC: CLUB: Current PC Club or Unattached PC:

Qualifying Meet	Date / Submit by:	Check Meet:	List one Individual Event Swum:
ConocoPhillips National Champs Irvine, CA	Aug 3 - Aug 7, 2010 October 7, 2010	<input type="text"/>	Event # <input type="text"/>
Speedo Junior Championships Irvine, CA	August 9-13, 2010 October 13, 2010	<input type="text"/>	Stroke/Distance <input type="text"/>
S/C National Championships Columbus, OH	December 2-4, 2010 February 4, 2011	<input type="text"/>	Time Swam <input type="text"/>
S/C Junior Championships Atlanta, GA	December 9-11, 2010 February 11, 2011	<input type="text"/>	Prelims or Finals <input type="text"/>
Other Meet: Please list:	Date of Meet:	<input type="text"/>	Heat # <input type="text"/>

I apply for the Pacific Swimming Travel Reimbursement, certify that the above information is accurate, **have attached receipts** and request that payment be made:

To the swimmer at the above address. Swimmer's Email:

To the swimmer's parent, if under 18. Did you travel out of the Reno or Sacramento airport? YES or NO

Parent's Name: Parent's Email:

Parent's Address:

City: State: Zip:

To the Club.

Club Name: Contact's Email:

Club Address:

City: State: Zip:

Swimmer or Parent's Signature or Club Representative's Signature & Position

Date: _____ Date: _____

NOTE: Receipts for Airfare, Lodging and/or Food, up to the amount of the approved assistance amount must be attached to this application in order for the request to be processed.

SEND Pacific Swimming Registration FORM and RECEIPTS TO: 1034 Woodstock Court Walnut Creek, CA 94598 - 4538	For Office Use Only
Registration Verified - Date: <input type="text"/>	Receipts Attached: <input type="text"/>
Questions: Telephone: (925) 933-0395	Allowance: \$ <input type="text"/> (0 - 50% - 100%) Paid: \$ <input type="text"/> (100%-80%-60%-50%-30%-10%-0)
	Date: <input type="text"/> Check # <input type="text"/>
	Acct #: 55015 - 55025 - 55035 - 55040 - 55050