

METROPOLITAN SWIMMING  
REIMBURSEMENT FOR INDIVIDUAL EVENTS AT  
**SPEEDO CHAMPIONS SERIES (SECTIONALS)**  
(March 12-15, 2009)

**Swimmers must have made the cuts for EZ Sectional North to qualify for this stipend**

CLUB \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ email \_\_\_\_\_

For each athlete, list the five Metro meets (one of which must be Senior Mets) that the athlete attended from **March 10, 2008** to **entry deadline**.

Please note: The athlete's name must appear in individual events on meet results.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Meets & Date:

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_

Meets & Date:

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Meets & Date:

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_

Meets & Date:

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_

**PS: Proof of travel/hotel expenses must accompany this request (see list)**

Athlete in Individual Event: \$200

Send to: M. Senecal, 1 Bonwit Place, Farmingdale, NY 11735 by **4/16/09**

## **LIST OF APPROVED DOCUMENTS FOR PROOF OF TRAVEL EXPENSES FOR CHAMPIONSHIP MEET STIPEND**

- Hotel receipts from venue area / city and within date range of the meet
- Receipts or ticket stubs for air fare, train or bus to / from city of meet venue
- Mileage – include a map quest or similar travel program to support mileage from athlete's home to city of meet venue. Mileage will be reimbursed at a rate of .37 cents per mile. (This is the approved rate for mileage for Metropolitan Swimming LSC related travel). Please list any toll related expense.
- Meal receipts (meal expense up to \$25 per day per athlete will not require a receipt)

The requirement for proof of travel expense is to protect Metropolitan Swimming Inc. and the teams and athletes receiving the stipends.