



## OSI National Travel Reimbursement Form (rev 7/30/16)

Name and Location of Meet \_\_\_\_\_

Eligible swimmers shall compete in a minimum of 3 OSI sanctioned competitions during the short course season and 2 OSI sanctioned competitions during the long course season. For additional eligibility requirements, refer to OSI's website under Administration and Standing Rules. Completed forms must be received before April 15<sup>th</sup> for Short Course reimbursement consideration and before September 15<sup>th</sup> for Long Course reimbursement consideration. Reimbursements checks issued to clubs do not require receipts.

Club Code: \_\_\_\_\_ Attending Coach: \_\_\_\_\_ Email: \_\_\_\_\_

Name & Address of Club Treasurer: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

I have read USA Swimming's Code of Conduct and understand that OSI reimbursement will be forfeited if this code is violated. Follow this link to see the code <http://www.usaswimming.org/ViewMiscArticle.aspx?TabId=1599&mid=6074&ItemId=5517>.

Coach Signature & Date \_\_\_\_\_

Athlete Name	List one individual event swam at meet	Relay Only?	OSI Sanctioned Meet 1	OSI Sanctioned Meet 2	OSI Sanctioned Meet 3 (SC only)
1.					
2.					
3.					
4.					
5.					

Scan and email this completed to [office@oregonswimming.org](mailto:office@oregonswimming.org)