

Squash BC Junior Pathways Expense Claim Form:

Please provide ALL RECEIPTS or copies of receipts within 15 days of the event.

Expenses will not be reimbursed without Receipts.

Type of Program Support:

Developing Event Support, \$500.00 \$ _____
Progressive Event Support, \$350.00 \$ _____

Traveling Coach Expenses:

Must be approved by Squash BC before event.

Meals @ \$45.00 per day or receipts whichever is less. # of Days = \$ _____
Mileage @ \$0.48 per Km. or rental car whichever is less. #of KM = \$ _____
Air Travel: Must be booked at least 3 weeks in advance \$ _____
Other Travel, (ferries/taxis/parking/etc.) \$ _____
Accommodation: Preferred rates \$ _____
Total: \$ _____

Program Details MUST be Filled Out for Each Day.

Name of Organizer: _____ Name of Coach: _____
Location of Program: _____
of Hours and Date/s Program Ran: _____
of Athletes Attending? Female: _____ Male: _____ Age Range: _____
Please attach list of athletes

Name to make out and send cheque to? Please print neatly!

Name: _____ Home Ph: _____
Address/City: _____ Post Code _____
Name/Signature: _____ Date: _____
If sent by e-mail no signature is necessary

Please send with receipts or copies of to:

Squash BC
4867 Ontario St. Vancouver, BC V5V 3H4
E-mail: Executivedirector@squashbc.com Fax: 604 736 3527

Office Use Only

Code to: 24405 Junior Pathway Account? Gaming
Amount: \$ _____ Authorized By: _____