

# Utah Swimming, Inc. Request for Reimbursement

Circle meet you are requesting funding for:

1. Sectionals   2. Jr. Nationals   3. Nationals   4. Olympic Trials   5. Disability Championships

Name of Swimmer: \_\_\_\_\_ USA # \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Club Attachment: \_\_\_\_\_ Coach: \_\_\_\_\_

College Swimmer? \_\_\_\_\_ College name: \_\_\_\_\_

Date and Location of Meet: \_\_\_\_\_

Events Swum at meet:

\_\_\_\_\_

\_\_\_\_\_

Utah Swimming Meets attended this attended this season:

\_\_\_\_\_

\_\_\_\_\_

Mail Request to:  
Diane Peterson  
USI Senior Chair  
333 North 400 East  
Lehi, Utah 84043

**Please attach receipts supporting amount of funding request**

Form must be postmarked by **November 30** of year funding is requested in order to be considered by the board for funding

Please refer to Utah Swimming, Inc. Standing Rules for funding eligibility