IOWA SWIMMING, INC.

ATHLETE APPLICATION FOR TRAVEL FUNDS

*“An amateur cannot accept reimbursement for board and traveling expenses in excess of the actual justifiable amount incurred by the swimmer.”*

INSTRUCTIONS: This form must be COMPLETELY filled out. Forward application, together with receipt for lodging; transportation - airfare, gas purchases receipt required or mileage; per diem $25 (receipt not required) and a statement of all funds received from other sources, if any, to the ISI Office. IT IS MANDATORY THAT YOU SHOW THE REQUIRED IOWA MEETS ATTENDED: 3 ISI Invitational meets for season applying and minimum of 3 individual events per meet. *See page 2-3 of this form for additional information.*

DEADLINE: The deadline for submission of the completed Athlete Travel Reimbursement: Short Course Season shall be March 31st or 3 weeks, after the final day of competition for the final listed eligible meet, whichever is later. Long Course Season shall be August 31st or 3 weeks after the day of competition for the final listed eligible meet of the long course season, whichever is later.

*NAME:*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_

## PHONE: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SWIM CLUB REPRESENTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## NAME OF EVENT ATTENDED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## LOCATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## DATE OF EVENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## EVENTS SWAM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## IOWA MEETS ATTENDED THIS SEASON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*TRANSPORTATION (Air & Gas Receipt required or mileage): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*LODGING (Receipt required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FOOD PER DIEM: \_\_\_\_\_\_\_\_ DAYS @ $25 = $\_\_\_\_\_\_\_\_\_\_\_\_\_*

*OTHER FUNDS APPLIED FOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

## OTHER FUNDS RECEIVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SIGNATURE OF APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## DATE OF REQUEST: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Send request to Iowa Swimming, Inc*

*marie@isiswim.org*

# APP-18a Rev 7/2017

ATHLETE TRAVEL REIMBURSEMENT

1. Athlete must be a registered annual member of Iowa Swimming, Inc. at the time of competition for which the athlete is seeking reimbursement. Further, athletes must be members of ISI at the time of participation in qualifying meets during the season that reimbursement is requested.
2. Athletes must compete in three (3) ISI sanctioned open & closed invitational meets during the season reimbursement is requested. (Rules will apply at both up to two open invitational meets and closed sanctioned meet (novelty or invitational) as long as 6 or more ISI registered club teams participating in the meet and over 150 swimmers are entered to participate in the meet.) Swimmers must compete in a minimum of three (3) individual events per qualifying meet. In a prelims/finals meet, swimmers must participate in finals, if qualified, in order for the event to count.
3. Any athlete who believe that he/she is worthy of reimbursement despite not meeting the qualifying requirements may file a written request with application for a waiver. Such request shall contain an explanation as to why the athlete did not meet the qualifying requirements, but feels reimbursement is warranted. Each case will be handled on an individual basis by the ISI Board of Directors.
4. A maximum will be allocated to athlete reimbursement, based on current year’s budget.
5. The following are a list of meets for which reimbursement will be granted and the maximum allowable reimbursement. ISCA is responsible for designated meets as drive-to and fly to.

A – LEVEL REIMBURSEMENT

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *SC*  *Season* | *LC Season* | *Meet* | *Maximum allowable*  *Fly-To* | *Maximum allowable Drive-to* |
|  | X | Olympic Trials | $750 | $550 |
|  | X | World Championship Trials | $750 | $550 |
|  | X | Phillips 66 National Championships | $750 | $550 |
|  | X | US Open | $750 | $550 |
|  | X | Speedo Junior Nationals | $750 | $550 |
|  | X | Futures Championships | $750 | $550 |
| X |  | AT&T Winter National Championships | $750 | $550 |
| X |  | Speedo Winter Junior Championships | $750 | $550 |
|  | X | Open Water National Championships | $750 | $550 |
|  |  | Disability Championships | $750 | $550 |
| X | X | Relay only swimmers at A-level meets | $250 | $250 |

B – LEVEL REIMBURSEMENT

|  |  |  |  |
| --- | --- | --- | --- |
| *SC Season* | *LC Season* | *Meet* | *Maximum allowable* |
| X | X | Speedo Sectional Series | $250 |

C – LEVEL REIMBURSEMENT

|  |  |  |  |
| --- | --- | --- | --- |
| *SC Season* | *LC Season* | *Meet* | *Maximum allowable* |
|  | X | Age Group Zones (14&U) | $150 |
|  | X | Open Water Zones | $150 |
| X | X | Arena Pro Series | $150 |
| X |  | IMXtreme Games | $150 |

1. No reimbursement shall be given to relay only swimmers at the B-level or C-level. No reimbursement shall be given to athletes who swim at these meets with an unproven time and do not meet the qualifying standards at the meet.
2. Eligibility
   1. All swimmers eighteen and under, who have not yet graduated from high school, shall be eligible for full reimbursement regardless of length of membership in ISI.
   2. Swimmers 19 and over who were registered members of ISI prior to high school graduation shall be eligible for full reimbursement.
   3. Swimmers 19 and older whose first registration with ISI is after high school and have been registered members of ISI for less than one full calendar year shall be eligible for 50% reimbursement. Swimmers 19 and older whose first registration with ISI is after high school and who have been registered in ISI for greater than one full calendar year shall be eligible for full reimbursement.
   4. Swimmers who register with ISI for the first time after high school graduation, but who have not yet enrolled in college, are not eligible for any reimbursement.
3. Swimmers are eligible for reimbursement for one meet per season. If funds are available after all level first requests are met, 2nd meet request will be eligible for reimbursement. Exception: In an Olympic year, Olympic Trials meet will be reimbursed, along with a 2nd meet request.
4. Airfare to Futures, JNATS and Nationals will be reimbursed immediately upon submission of airfare receipts up to $500. The athlete will still be required to submit the reimbursement form by the deadline for the season and will be held to all the Iowa Swimming requirements in this document. Failure to fulfill all the requirements and submit the form will result in full repayment of the early airfare reimbursement to Iowa Swimming
5. The athlete registration fund will be allocated as follows:
   1. The initial reimbursement for athletes at A-level meets will be allocated first.
   2. Any remaining funds will be distributed to initial requests for athletes at B-level meets. The amount available will be divided by the number of requests in determining the amount of fund distributed to each athlete, not to exceed the maximum allocated amount.
   3. Any remaining funds will be allocated to C-level meets. The amount available will be divided by the number of requests in determining the amount of funds distributed to each athlete, not to exceed the maximum allocated amount..
   4. Any remaining funds will be allocated for second reimbursement request after all levels initial request have been met.
6. A maximum of $25 per diem for food is allowed. Receipts are not necessary
7. Submittal Deadline – Travel reimbursement requests must be made on ISI form APP-18a. The deadline for submission of the completed Athlete Travel Reimbursement: Short Course Season shall be March 31st or 3 weeks, after the final day of competition for the final listed eligible meet, whichever is later. Long Course Season shall be August 31st or 3 weeks after the day of competition for the final listed eligible meet of the long course season, whichever is later. Mailed reimbursement forms must be emailed by that date. If the request is sent as email attachment, the sender will receive an email from the ISI office stating that the form has been received. Any claims rejected on the basis of failing to meet the deadline may appeal to the ISI Board of Directors. Each case will be handled on an individual basis.
8. APP-18a along with actual travel receipts shall be emailed to the ISI office. Funds received from other sources shall be listed on this request.
9. To receive ISI Athlete Travel Reimbursement funds, an athlete must show documentation of an overnight stay expense for each day during the competition for which the athlete is seeking reimbursement.

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