



# RECREATIONAL SPORTS

UNIVERSITY OF NORTH TEXAS

## *Sport Club Program REQUEST TO TRAVEL FORM*

Please fill in ALL of the required information. Please be sure all of this information is legible!

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Name of Club \_\_\_\_\_

Faculty Sponsor Name: \_\_\_\_\_

Destination: \_\_\_\_\_ Dates of Travel: \_\_\_\_\_  
(From the day you leave until the day you will be returning)

Purpose of Travel: to compete in the \_\_\_\_\_

(Include the name of the tournament and any sponsoring organizations, DO NOT USE abbreviations)

\_\_\_\_ Travel Advance Amount \$ \_\_\_\_\_

\_\_\_\_ Travel Reimbursement Amount \$ \_\_\_\_\_

Account Number \_\_\_\_\_

Need Check by: \_\_\_\_\_

◆◆If Flying◆◆

\_\_\_\_ Travel Advance for Airfare

Regular Fare: \$ \_\_\_\_\_ Airline: \_\_\_\_\_

Supersaver Fare: \$ \_\_\_\_\_ Airline: \_\_\_\_\_

(Contact the Rec. Sports Office for this information)

Estimated Cost	Calculations	Totals
Entry Fee:		
Transportation:	# of cars ___ x ___ miles x 2 x \$.20	
Lodging:	# of Students ___ x ___ nights x \$10.00	
Other:		
Total Cost:		

For Office Use Only: \_\_\_\_\_ Travel Approved Date \_\_\_\_\_

\_\_\_\_ Assistant Director of Sport Clubs \_\_\_\_ ASO \_\_\_\_ Associate Director \_\_\_\_ Director