



REQUEST TO TRAVEL FORM

Name of Sport Club: _____

Destination: _____ **Dates of Travel:** _____
(City & State) (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)

Preferred post travel meeting: Day: _____ Time: _____

Estimated Cost	Calculations	Totals
Entry Fee __ TA __ TR __ NR		
Lodging __ TA __ TR __ NR	# of Rooms _____ x _____ nights x _____ rate	
Rental Vehicle <i>(must submit vehicle request form)</i>	# of vans _____ x _____ days x \$52.00	
Gas __ TR (Need Receipts)		
Mileage <i>(can't use w/ TAC card)</i> __TR - No Receipt's	# of cars _____ x _____ miles x 2 x \$.20	
Other		
Total Cost		

_____ **Travel Advance** **Amount \$** _____
(Must be submitted 3 weeks prior to the trip)

_____ **Travel Reimbursement** **Amount \$** _____

_____ **Travel – No Reimbursement** **Amount \$** _____

Total \$ _____

_____ **1. Allocated Account (160720-200-880002-500-3211)** **Amount \$** _____

_____ **2. Athletics Account (160720-200-880003-500-3211)** **Amount \$** _____

_____ **3. Rollover Account (160720-202-885000-500-3211)** **Amount \$** _____

Total \$ _____

Request submitted by: _____ Travel Contact: _____