	<p>Document Number: HSC-FORM-0005 Rev. 0</p> <p>Document Name: HSC Coach & Volunteer Reimbursement Form</p>	<p>Form Rev. Date: Oct. 20, 2022</p>
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This form is to be completed in accordance with HSC-P&P-0011 – HSC Coaching Policies. Board members, officials and other volunteers may also complete this form for training, courses and other swim-related events. Board pre-approval of reimbursement is highly recommended.

Lead Coach Reimbursement

Lead coaches meeting the requirement for reimbursement per HSC-P&P-0011 shall complete this section to be reimbursed for coaching:

Option 1: Registration Reimbursement

Lead Coaches with swimmers registered in a HSC program or are themselves registered in a HSC program may opt to have their registration fees reimbursed to a maximum of 100% based on the calculation below. The reimbursement will be issued as a refund against the associated HSC account.

Number of coaching hours per week minus 2 hours of volunteer coaching hours = _____ (A)

Reimbursement Rate (set by the board and approved at the Annual General Meeting) = _____ (B)

Registration Reimbursement = A x B x 35 weeks = \$ _____

Option 2: Mileage Reimbursement

Lead coaches not eligible for Option 1 will be eligible to claim mileage for travelling to and from practice. Reimbursement of mileage can be collected after each month of practices.

Note: The board reserves the right to request proof of distance travelled.

Total round trip commuting distance travelled to attend practice (kms at months end) = _____ (A)

Mileage Reimbursement Rate as set by the Board = _____ (B)

Mileage Reimbursement = A x B = \$ _____

Date Period for Reimbursement = _____



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Swim Competition, Training & Other Swim Related Events

Coaches meeting the requirements for reimbursement for swim competitions and other swim related events per HSC-P&P-0011 may claim the following reimbursements.

Note: The board reserves the right to request proof supporting the items populated in this form.

Event or Training Course (Provide receipt)

Total cost of event or training course (minus amount covered by grants) = \$ _____ (A)

Date(s) attended: _____

Mileage

Total round trip commuting distance to training, swim competition or event (kms) = _____ (B)

Mileage Reimbursement Rate as set by the Board = \$/km _____ (C)

Mileage Reimbursement = A x B = \$ _____ (D)

Accommodations (for travel over 100km from coach's residence – Provide receipt)

Total Accommodations (up to \$250/night) = \$ _____ (E)


Date(s) of stay: _____

Food Allowance (Up to \$50/day)

Total Food Reimbursement = \$ _____ (F)

Total Competition / Event Reimbursement

Total Reimbursement = A + D + E + F = \$ _____

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Reimbursement Requestor:

Requestor's Name: _____ Requestor Signature: _____

Total Reimbursement Amount: _____ Date Submitted: _____

Pre-Approved by Board: Y / N Proof / Receipts attached:

Additional Comments:

Reimbursement Approval Requirements:

1. Reimbursements of \$100 or less. One of below officers must sign the form prior to submission to the Treasurer for reimbursement.
2. Reimbursement of \$100 to \$500. Two of the below officers must sign the form prior to submission to the Treasurer for reimbursement.
3. Reimbursement of \$500 or greater. Three of the below officers must sign the form prior to submission to the Treasurer for reimbursement.

Approval Signatures:

President: _____ Date: _____

Treasurer: _____ Date: _____

Secretary: _____ Date: _____

Oversight: _____ Date: _____