



RENO WHEELMEN

Request for Reimbursement

(refer to Reimbursement Policy for details)

For the calendar year 20__

Name: _____
 Mailing Address: _____

Phone #: _____
 Email: _____

Event Name	Category	Result	Amount	Club Event Worked or Approved Activity	Tier
1.					1
2.					
3.					
4.					
5.					
6.					2
7.					
8.					
9.					
10.					
11.					3
12.					
13.					
14.					
15.					
Clothing Allowance					
Official's License Fee				N/A	
Total Reimbursement Request:					

- Requirements:
- Current year club jersey worn during all events
 - Actually participated in event and tried to complete it
 - Active club member with dues paid
 - Reno Wheelmen listed as Club/Team on race entry form

Reimbursement amounts:
 \$30 Each Road, MTB, Cyclocross, or Touring Event
 \$100 Clothing Allowance

For each tier of reimbursement, member must work 1 club event. Qualified events are:

- Peavine MTB race
- Short track MTB race weekend
- Two Twilight Road or MTB races
- District TT
- Sagebrush CX Race
- Two SYCL Races

Mail this form to: The Reno Wheelmen
 Attn: Rich Paul
 PO Box 12832
 Reno, NV 89510-2832
secretary@renowheelmen.org

*Serving as a Race Director or on the club Board of Directors qualifies a member for Tier 2 Reimbursement.