

Request for Reimbursement (refer to Reimbursement Policy for details)

For the calendar year 20__

Name:Mailing Address:			Email:			
				GLI E W L L	1.4	T
Event Name	Catego	ry Result	Amount	Club Event Worked	or Approved Activity	Tier
1.						
2. 3.						
3.						1
4.						
5.						
6.						
7.						
8. 9.						2
9. 10.						
11. 12.						
13.			+			
14.						3
15.						
Clothing Allowance						
						· ·
	Total Paimbu	ircament Dequest				
Total Reimbursement Request:				Daimbanaan ant an a		
Requirements: Current year club jersey worn during all events Actually participated in event and tried to complete it Active club member with dues paid				Reimbursement amounts: \$30 Each Road, MTB, Cyclocross, or Touring \$100 Clothing Allowance		
	en listed as Club/Team on race	entry form		\$100 Clothing Tine	wance	
		viivi ji i i i i i				
For each tier of reimbursement, member must work 1 club event. Qualified events are:				Mail this form to:	The Reno Wheelmen	
[] Peavine MTB race	[] Dist				Attn: Jenny Frayer	
[] Short track MTB race week		ebrush CX Race			PO Box 12832	
[] Two Twilight Road or MTI	3 races [] Two	SYCL Races			Reno, NV 89510-2832	
					clothing@renowheelme	en.org

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