



2004 NCS NATIONAL TRAVEL REIMBURSEMENT FORM

TEAM _____ DATE _____

COACH WHO ATTENDED THE MEET _____

CLUB ADDRESS _____

EMAIL _____ PHONE _____

Mail this form to **Paul Silver, NCS Sr. Chair, 108 East Camden Forest Dr., Cary, NC, 27511** by **April 1, 2004** for 2004 Spring Nationals, **Aug. 31, 2004** for Summer Nationals/Olympic Trials. Swimmers receive 1/3 share their 1st season registered in NC, 2//3 share their 2nd season. Swimmers must have swum in 2 NC meets to be eligible (ACC's/Sectionals may be used as NC Meets)

PHILLIPS SPRING or SUMMER 2004 SR. NATIONALS

Athletes	Event	1 st Date Registered with NCS
----------	-------	------------------------------------------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

_____	_____	_____
-------	-------	-------

