



“Sports on the Move” BC Travel Grant for Athletes

BC Deaf Sports Federation
 #4-320 Columbia St, New Westminster, BC V3L 1A6
 TTY/Fax: 604-526-2010 Email: info@bcdeafsports.bc.ca

Payable to: (name and address required)	Date Submitted:
Address: (street, city, and postal code)	Date of Event:
	Name of Sport:
Address: (street, city, and postal code)	What kind of Event (training, clinic, tournament)?
Address: (street, city, and postal code)	Signature:

**Please submit within 30 days with original receipts.
 Note: only up to 50% will be reimbursed**

TRANSPORTATION:	Receipt Submitted	Total (\$)	Office Use Only
Flight (economical rate)			
Hotel			
Parking			
Ferry			
Gas (option if not using mileage)			
Mileage(\$0.61/km) KM in box* →			
*if multiple trips, please attach summary			
Others			
TOTAL EXPENSES: (Reimbursement is up to 50% or a maximum of \$300 after deduction per application form, with a maximum \$900 per year per person.)			____ % deduction
TOTAL AMOUNT REIMBURSED:			

For office use only – updated as of March 2024

Approved by:		Date:
No#		Date:

