



US Lacrosse Coaches' Travel Clinic Program

**General Information about the Program**

- A. Each year US Lacrosse offers Coaches Travel Clinics, sending a maximum of two clinicians to clinics around the country in an effort to promote the growth of the sport in developing lacrosse areas.
- B. Clinicians are reimbursed for travel expenses to and from a clinic. The sponsoring group is responsible for providing housing, meals and local transportation.

Travel Reimbursement Rates:	Airfare -	Full Coach Fare (with advance booking)
	Car -	.345 cents/mile
	Train -	Full Coach Fare
	Bus -	Full Fare

(Clinicians should submit receipts and completed travel reimbursement form to US Lacrosse, Attn: Director of Programs)

- C. If more than one clinician is approved, only one coach may be selected from each level, i.e. club, college, junior college and secondary school.
- D. All members of the US Lacrosse (Men's Division Coach Members) in good standing are eligible to be clinicians. Members who are interested should contact US Lacrosse.
- E. No coach is permitted to do more than one Coaches Travel Clinic every two years (a list of ineligible clinicians is attached).
- F. Applicants wishing to receive Coaches Travel Clinic support must return this form two months prior to the clinic.
- G. US Lacrosse will work with the Coaches Travel Clinic committee to confirm clinicians and notify the sponsor contact with the clinicians' information.
- H. Travel arrangements must be made by the individual clinicians. Note: **Airfare reservations must be made through the US Lacrosse travel agent, Roland Park Travel, 1-866-580-2854 (contact person: Beaumont Martin)**, UNLESS less expensive tickets may be found by the clinician on his/her own.
- I. Following the clinic, clinic organizers must complete the event survey provided and submit event pictures, press releases, quotes, etc. to US Lacrosse.

Please return this application form to:

Programs Department, US Lacrosse  
113 W. University Parkway  
Baltimore, MD 21210-3300  
410-366-6735 (fax)  
[jallen@lacrosse.org](mailto:jallen@lacrosse.org) (email)

Questions, email above address or call 410-235-6882 ext. 121.



US Lacrosse Coaches' Travel Clinic Application

**Sponsor Group Information**

Name of Sponsoring Group: \_\_\_\_\_

Location of Clinic: \_\_\_\_\_ Date of Clinic: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W) \_\_\_\_\_

FAX: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Clinic Information:**

Please circle the type of coach(es) you are looking for:      Women's game      Men's game

Target Group: (Check)      \_\_\_\_\_ Youth      \_\_\_\_\_ High School      \_\_\_\_\_ College  
   \_\_\_\_\_ Players      \_\_\_\_\_ Coaches

Total Expected: \_\_\_\_\_

What topic(s) would you like covered?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

What coaches would you like to speak?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Closest Airport: \_\_\_\_\_

Train Station: \_\_\_\_\_

Bus Station: \_\_\_\_\_

