



Sacramento State University
Intercollegiate Athletics
TRAVEL REQUEST- Team



Sport: _____ Departure Date: _____ Event Date _____ Return Date: _____
 Destination: _____ Departure Time _____ Return Time: _____
 Preseason _____ Regular Season _____ Post Season _____

TRAVEL SQUAD SIZE	Coaches	Student Athletes	Other	Total

MEALS	# of meals	x Travel Squad size	x cost	Total
Breakfast			\$5.00	
Lunch			\$8.00	
Dinner			\$12.00	
Total Meal Cost				

LODGING	Hotel Name			
Phone		Fax		

# of nights	Cost	x # of rooms	X cost	Total

TRANSPORTATION

Charter Bus	Cost	Driver	Total

Rental Car	Cost	x Travel Squad Size	Total

Air	Cost	x Travel Squad Size	Total

Airport Shuttle	Cost	x # of Vehicles	Total

		Item	Total
Miscellaneous			
Entry Fee			

TOTAL COST OF TRIP

ADVANCE

Issued To	Use	Amount

SIGNATURES:

Requestor/Date

Authorization/Date