

# Washington State Coaches Association Annual ISA Reimbursement Request

Individual Sport Association: \_\_\_\_\_

For the fiscal year of: \_\_\_\_\_ Today's Date: \_\_\_\_\_

ISA Representative making request: \_\_\_\_\_

Address to send Reimbursement: \_\_\_\_\_

This request must be received by the WSCA Secretary prior to June 30th  
in order to process the requested reimbursement.

In an effort to assist the Executive Board, please provide a brief list and/or  
description of the anticipated events your ISA will be sponsoring within  
the next year, ie. clinics, Hall of Fame ceremonies, workshops.

Thank you for your efforts in completing and submitting this request.