



## Coaching Reimbursement Form

Name: \_\_\_\_\_

Current Team: \_\_\_\_\_

USA Hockey CEP#: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Requesting reimbursement for:

USA Hockey Registration \$ \_\_\_\_\_

USA Hockey Coaching Clinic \$ \_\_\_\_\_

USA Hockey Age-Specific Module \$ \_\_\_\_\_

Other (explain) \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL REIMBURSEMENT REQUESTED \$ \_\_\_\_\_

Please attach receipts or other documentation and mail to the address below or email the Maine Junior Black Bears Treasurer, [treasurermainejrbb@gmail.com](mailto:treasurermainejrbb@gmail.com). Retain copies for your records. Reimbursements are typically made after the completion of the full season of coaching for coaches in good standing with the organization.

Maine Junior Black Bears  
Attn: Treasurer  
PO Box 2087  
Bangor, ME 04401