



**STATE FOOTBALL PLAYOFFS EXPENSE VOUCHER**

PLEASE RETURN SIGNED BY THE PRINCIPAL WHEN YOU SETTLE YOUR ADVANCE TICKET SALES. YOU WILL NOT BE REIMBURSED WITHOUT SUBMITTING THIS FORM

I hereby acknowledge that my team, \_\_\_\_\_ High School, has participated in the State Football Playoff Finals and desires expenses reimbursed for said participation.

EXPENSE REIMBURSEMENT

**GENERAL POLICY**

An expense allowance will be paid for lodging and meals shall be paid for a traveling squad of 59 persons (and not greater than twenty more than the number of players in uniform), to include players, cheerleaders, coaching and support staff, and administration.

**LODGING**

A lodging allowance shall not be paid for teams failing to stay in the property assigned by the Association. The lodging allowance shall be \$13.00 per night, for a maximum of 59 persons (and not greater than twenty more than the number of players in uniform), and will be paid for one night provided the lodging is utilized. Schools outside a forty mile one-way radius from Lexington will not receive a lodging allowance. Schools are responsible for all bills for lodging, and will be reimbursed the lodging allowance. Please have your school or Board of Education's Sales Tax Exempt number with you at check in to allow the hotel to deduct the sales tax from the room bill.

**MEALS**

A meal allowance of \$5.00 per meal will be reimbursed for a maximum of 59 persons (and not greater than twenty more than the number of players in uniform) with the amount of meals corresponding to the use of housing. Your school is responsible for all meal arrangements for your team.

**MILEAGE**

Each school is reimbursed \$2.00 per mile, round trip for two vehicles, from the school location to the host city, in accordance with mileage numbers provided by the American Automobile Association.

**RECEIVING YOUR REIMBURSEMENT**

I understand that the expense check will be mailed from the KHSAA offices not later than 30 days following the finals and that expense reimbursements will be made net of any damages done to the stadium that can be directly attributed to the student body or representatives of the school. I acknowledge the school's liability for damage directly attributable to the school, student body or fans. The KHSAA will take whatever action is necessary including fining the particular school and assessing the cost for repair to those schools leaving the seating area in a damaged condition or destroying any stadium property including fences, gates and barriers.

TOTAL PARTICIPANTS (MAX. 59 AND NOT MORE THAN 20 MORE THAN PLAYERS IN UNIFORM) \_\_\_\_\_

SIGNED BY: \_\_\_\_\_ POSITION: \_\_\_\_\_

REPRESENTING: \_\_\_\_\_ High School

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**FOR KHSAA USE ONLY**

Lodging occupied \_\_\_\_\_ Meals \_\_\_\_\_ Participants \_\_\_\_\_