



**Traveling Team
COACHES TRIP REPORT**

To be completed by the FWTT Head Coach immediately upon return from said trip, and submitted to the Far West office within 10 days of the completion of the trip

Head Coach Name: _____
Name of Event: _____
Location of Event: _____
Date of Trip: _____
List all coaches _____

Request for reimbursement of unexpected expenses must be accompanied by a receipt and explanation.

Wax accounting:

Type of wax	Weight	Taken on Trip	Used on Trip	Returned

Radios (how many were checked out, how many returned and any problems with them):

Rate 1-5,

1 being not at all, 5 was outstanding

Cooperation of chaperones with coaches: _____

Athlete to coach ratio: _____

Cooperation of athletes with coaches: _____

Chaperone behavior





**Traveling Team
COACHES TRIP REPORT**

Athlete Behavior:

Athlete Performance:

Accident/Injury/Illness report:

Coach behavior:

Race Venue:

Lodging/Accommodations:

Suggestions/Criticisms:

*Please email to lucy@fwskiing.org, fax to 1.866.739.2993, or
mail to Far West Skiing, PO Box 2664, Truckee, Ca 96160*



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