



2019 – 2020 HCOP Instructors Expense Form

(Account # 7555-3)

Separate form to be completed for each instructor

Clinic Location _____ Clinic Level _____ Clinic Date _____

Name _____

Address _____

Phone (c) _____ Email _____

Instructor Honorarium

- Level I, Level II or Level I/II Clinic (5 hrs) - Instructor Honorarium (2 Instructors) - \$100.00
- Level I, Level II or Level I/II Clinic (5 hrs) - Instructor Honorarium (1 Instructor) - \$200.00
- Level I, Level II or Level I/II Clinic (5 hrs) - Junior Instructor Honorarium - \$65.00
- Level III Seminar (3 hrs) – Instructor Honorarium (2 Instructors) - \$45.00
- Level III Seminar (3 hrs) – Instructor Honorarium (1 Instructor) - \$90.00

\$ _____

Meal Honorarium

\$ 15.00

TOTAL

\$ _____

ADDITIONAL EXPENSES INCURRED BY INSTRUCTORS

Travel from _____ to _____

_____ Km X .40¢ \$ _____

Mileage will be determined by government road map and figures.

Accommodation _____ days at \$ _____ \$ _____

Breakfast \$10.00 \$ _____

Dinner \$25.00

Breakfast and Dinner Honorariums will only be paid with overnight travel

RECEIPTS MUST BE ATTACHED IN ORDER TO CLAIM ACCOMMODATIONS AND ADDITIONAL MEALS

TOTAL \$ _____

Submit completed form to

Hockey Manitoba

cbergstresser@hockeymanitoba.ca

Hockey Manitoba Approval