



**METROPOLITAN SWIMMING, INC.**

99 Sheep Pasture Rd  
Port Jefferson, New York 11777  
Phone: 631-736-6422 – Fax: 631-938-7418  
[Metro.office@metroswimming.org](mailto:Metro.office@metroswimming.org)  
<http://www.metroswimming.org>

**Application for Distance Stipend  
Must be submitted within 30 days of the meet**

**Mail completed application to:  
Corinne Cody – 12 Shea Knolls Ct. – Campbell Hall, NY 10916**

Club \_\_\_\_\_

Person making application \_\_\_\_\_

Address \_\_\_\_\_

I am applying for stipend for Distance Meet of (dates): \_\_\_\_\_

Today's Date \_\_\_\_\_ Sanction # \_\_\_\_\_

\*\* Distance meet was announced as "Distance Meet" at the Bid Meeting – yes – no (please circle)

Signed \_\_\_\_\_

Dear \_\_\_\_\_:

Thank you for your request for a Metropolitan Swimming distance meet stipend. As you are aware, Metropolitan Swimming has a particular distance meet format that must be followed in order to receive your stipend. Clubs may only deviate from that formula and still receive a stipend provided they obtained specific Board approval prior to running their distance meet.

Below, you will find the status of your request:

\_\_\_\_\_ Your request for a stipend has been approved and your check is enclosed (check # \_\_\_\_\_)

\_\_\_\_\_ Your request for a stipend has been denied for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

Thank you for your continued support of Metropolitan Swimming.  
Sincerely,

The Metropolitan Swimming Board of Directors