

VAN USE REQUEST

Use dates requested: From _____ To _____

Requesting Church information

_____ **CHURCH/ ORGANIZATION NAME** _____ **Date of Request**

_____ **Street address** _____ **City** _____ **State** _____ **zip code**

_____ **Daytime phone number** _____ **E-mail**

_____ **Date of Session or Organization's Board approval of trip**

_____ **Signature of person making the request**

PURPOSE OF TRIP

Place any additional information on reverse side

Estimated miles to be traveled _____

DRIVER INFORMATION

(all drivers must be over age 25.)

(Driver should have taken the GuideOne safety Certification program)

Driver name **Driver's license number** **Age** **Cert. compl. Date**

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Add additional driver's information on reverse side