

## Van and Bus Reservation Form

*Drivers must have appropriate license for vehicle requested (CDL, air brakes, etc.) and must be approved by church /school insurance company. Required fields are in RED.*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Work \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_

Class/Organization Name \_\_\_\_\_

Church Affiliation \_\_\_\_\_

Event Name \_\_\_\_\_

Event Date(s) \_\_\_\_\_ (mm/dd/yy) TO \_\_\_\_\_ (mm/dd/yy)

Sun

Mon

Tues

Wed

Thurs

Fri

Sat

Time Leaving \_\_\_\_\_ Time Returning \_\_\_\_\_

Destination \_\_\_\_\_

Number of people to accommodate – circle one

less than 10

10-25

26-50

51-75

76-99

100+

Person responsible for van/bus \_\_\_\_\_

Driver(s) and Phone Number(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*office use only*

Date of Request \_\_\_\_\_

Approved/Date \_\_\_\_\_

Declined/Date \_\_\_\_\_

Office Representative \_\_\_\_\_

Date \_\_\_\_\_

*Keep a copy for the church office and give original to School Office for approval.*