CANAAN BAPTIST CHURCH

TRANSPORTATION

REQUEST FOR USE OF VEHICLE(S)

	*DATE SUBMITTED
NUMBER OF	DATE NEEDED
ORGANIZATION NAME:	
DESTINATION:	
NATURE OF TRIP:	
NUMBER OF PASSENGERS	
DEPARTURE TIME:	,
RETURN TIME:	•
ASSIGNED DRIVER(S)	
APPLICANT'S NAME:	
CHARGED TO: (Organization Name)	Organization President/Chair
PHONE NUMBER OF CONTACT PERSON	
APPROVED: YES	NO
MAKE & MODEL OF VEHICLE	
APPROVED BY	DATE OF APPROVAL
*ALL REQUESTS FOR USE OF VEHICLES I WEEKS PRIOR TO THE NEEDED DATE	MUST BE SUBMITTED TWO