

NMBC Van Request

Provide Trustees With Travel Requirements

Ministry Name:

Responsible Person: Phone #

Number of Vans Needed: Number of Passengers:

Number of Adults *Number of Children Under 18 years old*

- Number of signed waivers on file in the office:

(Waivers must be filled out and signed by parent or guardian before trip commence.)

Destination:

Address: City: State:

Departure Date: Departure Time:

Return Date: Return Time:

Will the van(s) be used after you reach your destination? Yes No

If yes, please explain:

Submitted By: Date:

Please Give Completed Form To:

Vice Delores Copeland

Chairman Herman Turner (404) 317-9083