TRIP INFORMATION FORM

Department_____Destination_____

Name of Motel or Venue:_____Phone Number:_____

Date & Time Departure_____Return_____

Vehicle License Plate Number_____

Contact Person/Phone_____

Attendees Name	*Attendees Cell Phone*	*Emergency Contact/Phone*

A copy of this <u>completed form</u> must be given to the Church Secretary, Pastor Myers, Pastor Russ and Contact Person for each vehicle.