

# Boys & Girls Club of Vineland

## TRANSPORTATION FORM VEHICLES \* VANS \* BUSES

*Parents & Agents are required to complete this form prior to Transportation Services being offered.*

Name of Member \_\_\_\_\_ Membership Number \_\_\_\_\_ VALID DATES \_\_\_\_\_

Type of Transportation (Check applicable boxes.)

☐ Boys & Girls Club Van ☐ Boys & Girls Club Bus ☐ ONE TIME USE \_\_\_\_\_

Name of Legal Parent/Guardian (FORM APPLICANT) \_\_\_\_\_

<b>PICK UP</b>	<b>A</b>	Address	Apt #	Intersection
		Adult at Residence (if applicable)		Telephone Number
		<b>MILLVILE &amp; VINELAND</b>		COMPLEX NAME (IF APPLICABLE)
				PRIMARY DRIVER INFORMATION
		Primary Driver (If not using Standard Transportation)		
<b>DROP OFF</b>	<b>B</b>	Address	Apt #	Intersection
		Adult at Residence (if applicable)		Telephone Number
		<b>MILLVILE &amp; VINELAND</b>		COMPLEX NAME (IF APPLICABLE)
				PRIMARY DRIVER INFORMATION
		Primary Driver (If not using Standard Transportation)		

D. Other Notes \_\_\_\_\_

Parent/Guardian Name (Print)	Signature	Date
Office <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Signature	Date