

PARISH VAN INFORMATION

ONE 7-8 PASSENGER VAN FOR EACH 5 YOUTH REGISTERED.

Please fill out one form per van to be placed inside the van.

Please note that these vans cannot be a Contractor's method of transportation to/from site.

PARISH NAME _____
DRIVER NAME _____
OWNER'S NAME _____
PHONE _____
ADDRESS _____
INSURANCE COMPANY/INS POLICY NUMBER _____
MAKE: _____ MODEL: _____ COLOR: _____
VAN LICENSE NUMBER _____
VIN NUMBER _____
This van is: <input type="checkbox"/> Borrowed <input type="checkbox"/> Personal <input type="checkbox"/> Rental

PARISH NAME _____
DRIVER NAME _____
OWNER'S NAME _____
PHONE _____
ADDRESS _____
INSURANCE COMPANY/INS POLICY NUMBER _____
MAKE: _____ MODEL: _____ COLOR: _____
VAN LICENSE NUMBER _____
VIN NUMBER _____
This van is: <input type="checkbox"/> Borrowed <input type="checkbox"/> Personal <input type="checkbox"/> Rental