

**NEW HOME BAPTIST CHURCH
TRANSPORTATION REQUEST FORM**

NOTE: Please complete form and return to the Transportation Ministry at least 30 (thirty) days in advance of scheduled trip.

Date of Transportation: _____

Pick-up Time: _____

Return Time: _____

Total Miles of Trip: _____

Number of people for trip: _____

Number of Vehicles Requested: _____

Name(s) of Driver(s): _____

Destination(s): _____

Ministry Contact Person: _____

Phone Number: _____

FOR OFFICE USE ONLY

Approval/Disapproval _____

Comments Regarding Decision: _____

