

Date Request Submitted

### Union Chapel Missionary Baptist Church

315 Winchester Road \*Huntsville, AL 35811\* (256) 852-1150 Phone

### Ministry Schedule Request Form (Vehicle)

### VEHICLE USE / OFF CAMPUS ACTIVITY

Transportation Request: \_\_\_\_\_ Requested By: \_\_\_\_\_

Event Start Leave/ Date: \_\_\_\_\_ Event Start Leave/ Date: \_\_\_\_\_

Event Start Leave/ Time: \_\_\_\_\_ Event End Leave/ Time: \_\_\_\_\_

#### Ministry Information

Ministry: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Night Phone: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Night Phone: \_\_\_\_\_

#### Transportation Requested

Transportation Requested (Bus, Van, other): \_\_\_\_\_ (Note: For Buses only, Driver will be assigned) Number Expected: \_\_\_\_\_

Driver(s): \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Driver(s): \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Off Campus Location: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Ministry Approval

Deacon: \_\_\_\_\_ Deacon Signature: \_\_\_\_\_

Contact #:

#### Transportation Ministry Approval

Transportation Deacon: \_\_\_\_\_ Deacon Signature: \_\_\_\_\_

Vehicle Assigned: \_\_\_\_\_ Driver Approved: \_\_\_\_\_

Ministry Contacted: