

VEHICLE BOOKING FORM

(BLOCK CAPITALS PLEASE) NAME OF CLUB/SOCIETY:_____ NAME OF PERSON MAKING BOOKING: POSITION IN CLUB/SOCIETY: MOBILE NUMBER: E-MAIL ADDRESS: NUMBER OF DAY DATE TIME **DESTINATION** PASSENGERS* START: FINISH: * A TRIP FORM AND JOURNEY PLAN MUST ALSO BE COMPLETED AND RETURNED BEFORE THE DATE OF THE TRIP NAME(S) OF REGISTERED DRIVER(S): SIGNATURE: DATE: (Registered Captain/Chairperson or Treasurer) **CONFIRMATION** To be completed by the Activities Development Officer. Please keep this portion to show the Receptionist/Duty Officer if required. NΒ Wherever possible the date(s) requested will be reserved. On certain occasions however (sometimes at short notice) this may not be possible. Notice of such changes will be given. TO: THE FOLLOWING BOOKING HAS BEEN CONFIRMED: FROM: _____ T0:____ VEHICLE ASSIGNED: ___ Pick up keys and logbook from _____ at ____ on Drop off keys and logbook to ______ at _____ on BOOKING CHARGE: £ PLUS CONGESTION CHARGE FEE: £_____ TOTAL £ RECEIVED BALANCE TO BE DEDUCTED FROM GRANT/SELF-RAISED FUNDS **RECEIPT NO:** SIGNATURE: DATE: