## Please return immediately

Scout Name:					
First Name:	La	ast Name:			
<b>—</b>	Home	( )	Work (	)	Cell
Car 1) Year, kind & make	e of Vehicle:				
of passengers including of	driver:	Inspection expiration da	ite:Li	icense plate:	
First Name:	L	ast Name:			
<b>—</b>	Home	( )	Work (	)	Cell
Car 2) Year, kind & make	e of Vehicle:				
of passengers including d	lriver:	Inspection expiration d	ate: L	icense plate:	
Oriver #1 has an Active/Cu	nrrent Driver Lice	ense from the State of :			
Oriver #2 has an Active/Cu	ırrent Driver Lice	ense from the State of:			
The Vehicles listed above a	are cover by	i	nsurance company ar	nd that policy expir	res on
(we) understand that by partake in Froop leadership.					
(we) confirm that everyo	ne will wear his o	or her seat belts whenever	my car is in motion.		
(we) confirm that I (we tinerary. If I were to deviny self to a lawsuit.					
(we) also understand tha eturn with. AND	t the scouts who	drive with me (us) in one	direction are not nec	cessarily the same	scouts that I (we)
(we) will not leave a can adult leader of the situation (we) will not leave before out!)	and appoint him	her to advise the rest of	the Troop. The Troo	p is counting on m	e (us) as driver(s)
(we) promise not to have	more scouts onbo	oard than what we have se	eat belts for.		
Signature of Driver 1:			I	Date:	
Signature of Driver 2:			Ī	Date:	