

MINI BUS BOOKING FORM (2AOH)

Name _____ **Section** _____

Date required. From _____ Time (approx) _____

To _____ Time (approx) _____

Destination _____

Purpose _____

Who will be driving?

1. _____

2. _____

3. _____

4. _____

**Have all drivers completed the 'Driver Registration Form'. Yes / No.
If no then you must obtain and complete the form for each driver!**

I understand that the safe driving and maintenance of this vehicle is my responsibility whilst it is my care and that whilst 2AOH will keep it in a safe roadworthy condition it is my responsibility to check the vehicle before driving.

I further understand that I/We are responsible for any offence (including parking) that may be committed whilst the vehicle is our responsibility and will provide full details including the name of the driver in charge at the time of the alleged offence.

Signed _____ **Date** _____

The vehicle will be handed over clean and with a full tank of fuel. It is the responsibility of the user to return it clean and with a full tank. Sections failing to do so will be charged for cleaning and or the fuel used and an administration charge for taking the vehicle to and from the filling station will be made against that sections funds.

**Please return completed form to
John McCartney
59 Chessmount Rise
Chesham
Bucks HP5 1RF**