

Order Number: _____

PIPO('s): 1:_____2:_____3:_____4:_____



Vehicle Booking Form

This form must be handed in two weeks before vehicle is required. Put times in a 24 hour period.

Date: _____

Club/Society: _____

1. Requirements:

Date Vehicle required from: _____ to: _____ Days required: _____

Time Vehicle required from: _____ to: _____

15 seat minibus [] 9 seat minibus [] Luton Van [] Car small []

9 seater (MPV) [] LWB van [] Car large boot []

12 seat minibus [] Transit van []

(15 seat minibus from Northumbria, 9 seat MPV from Arnold Clark; 9 and 12 seat minibus from either)

Purpose: _____

Preferred Supplier (if necessary): _____

2. Drivers

Name all registered drivers required: _____

Contact name: _____ Email: _____

3. Payment

I certify that on arrival of the invoice for these vehicles, the money can be taken from

Account: **Members** [] **Grant** [] **Society Special Grant** []

Treasurer signature: _____

For Finance Use Only:

Registration _____ Insurance Ref: _____ Paid: Vehicle : ___/___/___ Insurance: ___/___/___

Registration _____ Insurance Ref: _____ Paid: Vehicle : ___/___/___ Insurance: ___/___/___

Registration _____ Insurance Ref: _____ Paid: Vehicle : ___/___/___ Insurance: ___/___/___

Registration _____ Insurance Ref: _____ Paid: Vehicle : ___/___/___ Insurance: ___/___/___