

TRAVEL PLAN FORM

This plan to be filled in prior to start of journey
Give to corps officer/local leader not on the journey

For travel to divisional or regional events email to event leader and a copy to corps officer/local leader

Programme/Event Name:	Corps/Centre
Children's/Youth Worker:	Children's/Youth Leader/s

Vehicle 1

Driver/s Name/s	Licence Number/s and Type
Number of Passengers	Vehicle 1 Registration Number
Vehicle ownership (tick) <input type="checkbox"/> Salvation Army <input type="checkbox"/> Private <input type="checkbox"/> Rental	Type of vehicle (tick) <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Other

Vehicle 2

Driver/s Name/s	Licence Number/s and Type
Number of Passengers	Vehicle 2 Registration Number
Vehicle ownership (tick) <input type="checkbox"/> Salvation Army <input type="checkbox"/> Private <input type="checkbox"/> Rental	Type of vehicle (tick) <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Other

Vehicle 3

Driver/s Name/s	Licence Number/s and Type
Number of Passengers	Vehicle 3 Registration Number
Vehicle ownership (tick) <input type="checkbox"/> Salvation Army <input type="checkbox"/> Private <input type="checkbox"/> Rental	Type of vehicle (tick) <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Other

TRAVEL DETAILS (Can include departure and arrival times and planned stops)

