

# Troop 50 Motor Vehicle Information

*This information is required to transport Scouts to any Scouting activity, event or campout.*

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Age: \_\_\_\_\_

Age: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

State: \_\_\_\_\_

State: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Amount of Liability Coverage: Person / Accident / Property damage  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Single Limit  
 \_\_\_\_\_

## Vehicle Information

Year	Make	Model	# of Seat Beats	Driver's Name

Date form completed: \_\_\_\_\_