



Camp Fire USA Heartland Council

Driver Authorization

Instructions: Please submit information on all Drivers utilized by your club. Submit this information to your designated Program Staff contact, at least 15 days in advance of any Camp Fire related trip (in or out of town) involving this driver transporting minors.

Leader Name _____

Name of driver (1) _____

Type of transportation: car _____ van _____ bus _____ other _____

Driver's license number _____ State issued ____ Expires _____

Vehicle(s) insured by _____

Vehicle(s) description: _____

Vehicle(s) tag # _____

Name of driver (2) _____

Type of transportation: car _____ van _____ bus _____ other _____

Driver's license number _____ State issued ____ Expires _____

Vehicle(s) insured by _____

Vehicle(s) description: _____

Vehicle(s) tag # _____

(OFFICE USE)

Received by _____ Date _____