## **Personal Vehicle Authorization**

2634 Drake Road • Lebanon, OH 45036 • www.urbancrest.org • Office: 513-932-4405 • Fax: 513-932-4455

Church Activity:	Date(s):	
Address:	State:	Zip:
The undersigned hereby accepts responsibility as a legal and insured operator of their personal vehicle for the above mentioned activity for Urbancrest.		
Name:	I have a current and valid:	
	Driver's License ☐ Insurance Policy ☐	
Signature:	Date:	
Name:	I have a current and valid:	
	Driver's License	Insurance Policy
Signature:	Date:	
Name:	I have a current and v	alid
Name.		
	Driver's License	Insurance Policy
Signature:	Date:	
Name:	I have a current and v	alid:
	Driver's License	Insurance Policy □
Signature:	Date:	
Name:	I have a current and v	alid:
	Driver's License	Insurance Policy $\ \Box$
Signature:	Date:	