## Middlebury College Trip Departure Form

Vehicle:		
Organization:		
Destination:		_
Departure Date:	Time:	_
Return Date:	Time:	_
Driver's Name:		_
Midd ID #:	Cell Phone #:	
Names of Passengers:		
2	3	
4	5	
6	7	
8	9	
10	11	
expenses arising out of my use of a private and the vehicle in which I am traveling, inc  1. The observation of College policy, safe 2. Seat belts will be used by all passenger	The driving rules, and state laws.  The driver of the driver or passengers.  The solution of the driver or passengers.  The solution of the driver or passengers.  The driver or passengers of the driver or passengers.	
	Date:	