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. ____________________________________

I agree to indemnify and hold harmless Middlebury College, its employees and agents, from all claims, suits, and expenses arising out of my use of a private or College-owned vehicle and assume full responsibility for my actions and the vehicle in which I am traveling, including the following provisions:

1. The observation of College policy, safe driving rules, and state laws.
2. Seat belts will be used by all passengers and driver.
3. No alcoholic beverages will be consumed or used by the driver or passengers.
4. Smoking and smokeless tobacco use is not permitted in vehicle.
5. The driver is responsible for all forms and waivers.

Signature of Driver:

______________________________________________ Date: _____________________