

Girl Scouts of Southern Alabama, Inc.



Girl Scouts®

Vehicle Rental Application

Submit to the Mobile or Montgomery Service Center for approval at least four weeks before vehicle rental/lease/charter date. Refer to the *Leader Notebook* and *Safety-Wise* for vehicle rental/lease/charter policies and guidelines. Notification of approval/disapproval will be sent fourteen days prior to scheduled activity.

Troop Information

Leader Name _____ Troop # _____ Service Area _____

Address: Street _____ City/State/Zip _____

Phone: Home # _____ Work # _____ Cell # _____

E-mail Address _____

Program Grade Level Daisy Brownie Junior Cadette Senior Ambassador

Company Information

Name of company providing vehicle _____

Address: Street _____ City/State/Zip _____

Contact Person _____ Business Phone _____

and Type of Vehicle(s): Car _____ Van _____ Bus _____

Pick Up Date _____ Return Date _____

Insurance Information

The liability and collision insurance coverage by the Rental/Lease/Charter Company must be in the following amounts: (The rental of 15-passenger vans by troops/groups is strictly prohibited due to safety reasons.)

Liability: <u>TYPE OF VEHICLE</u>	<u>AMOUNT OF INSURANCE</u>	Collision: Minimum coverage required by law for all types of vehicles.
Automobile	\$1,000,000	
Van (7 passenger)	\$2,000,000	
Bus	\$5,000,	

Please check which statement applies:

- There will be sufficient insurance coverage from Rental/Leasing/Chartering Company.
A copy of the company's insurance must be attached to this application.
- Partial insurance coverage is available from Rental/Leasing/Chartering Company but additional insurance is needed to meet the required limits.
Insurance must be purchased from the Council. Please complete the following section and submit with payment.
- No insurance coverage is available from the Rental/Leasing/Chartering Company.
Insurance must be purchased from the Council. Please complete the following section and submit with payment.

Liability Insurance

To purchase liability insurance complete the section below and enclose a check or money order.

Type of Vehicle	# of Vehicles		Daily Premium		# of days		Amount Due
Automobile	_____	x	\$12	x	_____	=	\$ _____
Van	_____	x	\$15	x	_____	=	\$ _____
Bus	_____	x	\$26	x	_____	=	\$ _____
					Total Amount	=	\$ _____

OFFICE USE ONLY

Date Rec'd Stamp

Amount Received _____
Date Confirmation Sent _____

Copy of Insurance Attached Yes No
Application Approved Yes No