

Idaho State University Campus Recreation
SPORT CLUBS PROGRAM

Travel Authorization

Sport Club: Sport Club

Mode of Travel: University Vehicle(s) Personal Vehicle(s) Airplane Bus
 Other (explain)

Date and Time of: Departure Arrival

Final Destination:

Staying Overnight? Yes No **Where?**

Three Points of Contact: Name #
Name #
Name #

Who will contact the Assistant Director in the event of an emergency?

Who will provide first response in the event of an injury?

List of ALL Travelers

- | | | | | | |
|----|----------------------|----|----------------------|----|----------------------|
| 1 | <input type="text"/> | 11 | <input type="text"/> | 21 | <input type="text"/> |
| 2 | <input type="text"/> | 12 | <input type="text"/> | 22 | <input type="text"/> |
| 3 | <input type="text"/> | 13 | <input type="text"/> | 23 | <input type="text"/> |
| 4 | <input type="text"/> | 14 | <input type="text"/> | 24 | <input type="text"/> |
| 5 | <input type="text"/> | 15 | <input type="text"/> | 25 | <input type="text"/> |
| 6 | <input type="text"/> | 16 | <input type="text"/> | 26 | <input type="text"/> |
| 7 | <input type="text"/> | 17 | <input type="text"/> | 27 | <input type="text"/> |
| 8 | <input type="text"/> | 18 | <input type="text"/> | 28 | <input type="text"/> |
| 9 | <input type="text"/> | 19 | <input type="text"/> | 29 | <input type="text"/> |
| 10 | <input type="text"/> | 20 | <input type="text"/> | 30 | <input type="text"/> |

List of ALL Drivers:

- | | | | | | |
|---|----------------------|---|----------------------|---|----------------------|
| 1 | <input type="text"/> | 4 | <input type="text"/> | 7 | <input type="text"/> |
| 2 | <input type="text"/> | 5 | <input type="text"/> | 8 | <input type="text"/> |
| 3 | <input type="text"/> | 6 | <input type="text"/> | 9 | <input type="text"/> |

Campus Recreation Use Only
Date Rec'd - - Approval Signature