



**First Baptist Church of District Heights  
Dr. Robert A. Manning, Senior Pastor**

**Van Usage Request Form**

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Date of Request: \_\_\_\_\_ Ministry: \_\_\_\_\_

Representative: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Contact Phone # (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Short description  
of the vehicle use : \_\_\_\_\_

Approximate Round Trip Mileages: \_\_\_\_\_ Number of Passengers: \_\_\_\_\_

Recurring Trip?: \_\_\_\_\_ If Yes, recurrence pattern: \_\_\_\_\_

Date leaving: \_\_\_\_\_ Date returning: \_\_\_\_\_

Authorized Driver: \_\_\_\_\_

Driver's License Number and Issuing State: \_\_\_\_\_

Additional Authorized Drivers: \_\_\_\_\_

Driver's License Number and Issuing State: \_\_\_\_\_

Please Note:

- **Van to be returned in clean condition.**
- **Van fuel level is to be returned at the same level of when the trip started.**

**AGREEMENT:**

By signature below, Representative and Ministry agree:

- Have reviewed the Church Van Policies and Guidelines and agree to abide by them at all times during Van usage.
- Understand that Van usage may be denied.
- Acknowledge full responsibility for the use of the Van in the manner set forth in the Church Van Policies and Guidelines.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Email Completed Form to [transportation@fbcdh.org](mailto:transportation@fbcdh.org) for approval.

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**Connecting with Communities to Cultivate STRONG Christians**

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