



Vehicle Request & Authorization Form

Trip Outline

Group Requesting Vehicle Use _____ Date _____

Trip Leader _____ Phone _____ Email _____

Purpose _____

Trip Destination _____ Trip Date(s) _____

Destination Address _____

Vehicle Rentals

How many people will be going? _____ Name of Faculty member going (if any) _____

Date and time you will pick up the vehicles? _____ Date and time you will return the vehicles? _____

Date and time you will depart Potsdam? _____ Date and time you will return to Potsdam? _____

Drivers Names and License Numbers

Name	License Number	SGA approval
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

For overnight Trips Only

Lodging arrangements _____

Address _____

Phone Number _____ Number of rooms reserved _____

Contact name per room _____

Trip Registration (If Needed)

Registration price per student _____ Number of students attending _____

Check made payable to _____ (Attach registration forms)

Office Use Only

SGA Approval _____ Date _____

In consideration of my ability to participate in the above trip, I acknowledge, appreciate and agree that:

1. A trip may have unforeseeable circumstances beyond the control of SGA or SUNY Potsdam which could result in an accident or injury, the risks of which I knowingly assume;
2. The risk of injury from the activities involved in this program are significant, including the potential for permanent paralysis and death. While the use of safety equipment and personal discipline may reduce this risk, I am aware that the possibility of serious injury does exist and I knowingly assume all risks involved;
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard or hazards during my presence or participation, I will remove myself from participation and bring said hazard or hazards to the attention of the nearest official immediately
4. On the behalf of myself, my heirs, assigns, personal representatives and next of kin, I hereby release, indemnify and hold harmless SUNY Potsdam, SUNY Potsdam's Student Government Association, their officers, agents, representatives, employees, affiliate clubs, organizations and sponsors with respect to any and all injury, disability, death or loss or damage to person or property, to the fullest extent permitted by law

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

I also recognize that as a student and club member I must adhere, at all times, to all applicable laws and campus policies with regard to use of drugs and alcohol throughout the duration of any SGA trip or event. I represent SUNY Potsdam both at home and when traveling. The Code of Students Rights, Responsibilities and Conduct is applicable on and off campus.

Name	Signature	Cell Phone
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

Group requesting Vehicle _____ Date of Event _____