

Travel Registration Form

This form is to be completed by students traveling to and from an event or activity receiving financial support from Truman State University when that activity or event requires travel outside a 20 mile radius of campus.

Date Form Submitted: _____

Activity/event Description: _____

Dates of Travel: _____

Destination: _____

Name of sponsoring University Office or Organization:

If you are driving or are a passenger in a private vehicle, read the following carefully.

Insurance for Truman State University liability protection is provided by the Missouri Legal Defense Fund. This fund will provide liability coverage for drivers and passengers in University vehicles while on University business. It may not, however, provide coverage for passengers and drivers in private vehicles. You will be responsible for checking with your own insurance provider to make sure you have adequate insurance coverage for traveling to and from this event/activity.

If you are a passenger, complete this section:

If you are planning to be a passenger in a private vehicle, provide the following information:

Name: _____

Truman Address: _____

Truman Telephone: _____

In case of an emergency contact:

Name: _____

Address: _____

Telephone: _____

Driver of the car in which you will be a passenger: _____

If you are driving a private vehicle, complete this section:

Name: _____

Truman Address: _____

Truman Telephone: _____

In case of an emergency contact:

Name: _____

Address: _____

Telephone: _____

Year and make of vehicle: _____

Owner of vehicle: _____

Car License: State _____ Number _____

Attach a copy of your operators license and proof of insurance to this form.

All information above is accurate to the best of my knowledge. I understand the responsibilities and risks involved in traveling to participate in this event/activity. I pledge to exercise appropriate care and prudence in managing those risk and to obey all traffic and other laws relevant to safe travel.

Signature

Date