



HAMILTON EAST SEVENTH-DAY ADVENTIST CHURCH

REQUEST FOR THE USE OF THE CHURCH VAN

The ----- Department would like to use the van
for a trip to ----- (within Canada).

The date of departure is (MM/DD/YEAR) and time -----
and will return on (MM/DD/YEAR) and time -----

Thanks

Name (Please Print) -----

Signature -----

Date -----

Name of person receiving the request -----

Signature -----

Designation -----

Date -----

203 Bell Avenue, Hamilton ON L8K 3E5 Phone # 905 545 6180 Fax # 905 545 6059

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