



Travel Declaration Form

Registered Driver Name: (one name only)	
Driver's DOB:	
Contact Phone Number:	
Vehicle Registration:	
Vehicle Make & Model:	
Vehicle Colour:	
Is / will this car parked at the venue on the day of the meeting?	YES <input type="checkbox"/> NO <input type="checkbox"/>
By signing below, I confirm that I am the driver of the above vehicle for vehicle registration purposes in claiming travel allowance for this meeting.	
Signed: _____ Date: ____/____/____	

Please note only Members who drive to GAC meetings are eligible for a travel allowance payable in relation to the vehicle used. These allowances are only payable to 1 person per registered vehicle.

Office Use Only:
Vehicle Verified: YES <input type="checkbox"/> NO <input type="checkbox"/> Time: _____ AM / PM
Comments: _____ _____
Employee: _____