Trip leaders are reminded to return this completed form to the Trip Co-ordinator ASAP.

Members will not receive Clubman points unless the trip attendence/insurance form is submitted.

ARMADALE 4WD CLUB (INC)

TRIP ATTENDANCE/INSURANCE FORM

	TRIP LEADER:		TRIP DATE	:		APPROX T	RIP LENGT	TH:	
	BRIEF DESCRIPTION OF TRIP:					Run Trip	(20)		
						4WD Req.	(5)		
						Recce Req.	(5)		
							Total:		
	NAME OF ATTENDEES	VEHICLE DETAILS	REGO#	RECOVER	ASSIST	BREAK	BREAK	SWEEP#	
Photo Consent Y/N				# OF TIMES	TRIP LEADER # TIMES	CONVOY# TIMES	CODE OF ETHICS # TIMES	TIMES	
	Junior Member contributions by:	1)		2)			3)		
	(please insert names)	4)		5)			6)		

Trip Leaders are reminded that they are required to take the Club's First Aid Kit on all Club trips and activities

Emergency Rescue Helicopter

Service	- 1	300	306	454
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TRIP ATTENDANCE/INSURANCE FORM - CONTINUED

hoto Consent	NAME OF ATTENDEES	VEHICLE DETA	ILS REGO#	RECOVER # TIMES	TRIP LEADER #	BREAK CONVOY# TIMES	ETHICS#	SWEEP #
′/N					TIMES		TIMES	
				_				
	Junior Member contributions by:	1)		2)			3)	
	(please insert names) Date received:	4)		5)			6)	

Trip Leaders are reminded that they are required to take the Club's First Aid Kit on all Club trips and activities