

CONVOY DRIVER INFORMATION FORM

Name _____ Driver's License # _____

Mailing Address _____ City _____ Zip _____

Phone: Day _____ Evening _____ Cell _____

E-mail address _____ T-shirt size (circle): Medium Large Extra Large 2X 3X

DO YOU HAVE A TWIC? YES NO Do you have a CDL? Yes No

Are you comfortable driving a standard (stick shift) transmission? Yes No, Prefer Automatic

What size vehicle would you feel most comfortable driving?
 Large truck (10-ton) Very large truck (CDL required)

I can drive: (check all that apply)

Saturday, August 28th from Tacoma to Yakima

***Monday, September 27th or *Tuesday September 28th from Yakima to Tacoma *TBA**

If possible, I would like to be in the same convoy as:

What experience have you had driving large or heavy vehicles? (e.g. previous convoys, farm equipment, motor homes, have held CDL in past, etc.)

EMERGENCY INFORMATION: Any serious illness or injury within the last 6 months? Yes No
 If yes, please explain:

Please list any medical conditions or medications that we should know about in case of an emergency?

EMERGENCY CONTACT:
Name: _____ **Phone # ()** _____

I certify that the information given herein is true and complete to the best of my knowledge. I authorize the investigation of my driver's license status and other statements included in this application. I understand that misrepresentation or omission of facts called for here will be sufficient cause for declining this application. I also understand that, if my behavior or driving is determined to be inappropriate or dangerous, I may be removed from the convoy immediately.

**complete and return to
 re as soon as possible.
 Thank you!**

Signature _____ Date _____

Fax to: 1 (253) 486-1967 **Phone: (253) 597-6234**
Mail to: P.O. Box 18170 **campfireusaorca.org**
Tacoma, WA 98419 **psmpt@aol.com**

