

## GWRRA Travel Authorization Form

The GWRRA Travel Authorization Form must be completed by the Core Team Officers; Leadership Training International Director, Membership Enhancement International Director, and Rider Education International Director. Please complete and forward the signed form to the Director of GWRRA for approval. Once the form is received by the Home Office, you will be contacted and arrangements will be made for your trip.

### Section I- Travel Information

Traveler # 1: Name \_\_\_\_\_ Membership # \_\_\_\_\_  
(Please print name as it appears on your driver's license)

Birthdate: \_\_\_/\_\_\_/\_\_\_

Traveler # 2: Name \_\_\_\_\_ Membership # \_\_\_\_\_  
(Please print name as it appears on your driver's license)

Birthdate: \_\_\_/\_\_\_/\_\_\_ contact email address: \_\_\_\_\_

Officer's Title: \_\_\_\_\_ \*Travel Dates: \_\_\_\_\_  
(arrival) - (departure)

Officer's Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Section II- Event or Conference Information

Name of Event Attending: \_\_\_\_\_

Dates of Event: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

### Section III- Transportation and Lodging

Mode of Travel: \_\_\_ Air \_\_\_ Car \_\_\_ Motorcycle \_\_\_ Other

Dates of Travel: \_\_\_\_\_

City Departing From: \_\_\_\_\_

Hotel: If a hotel is needed, please complete the information below.

City: \_\_\_\_\_ Number of days: \_\_\_\_\_ Number of occupants: \_\_\_\_\_

Car Rental: If a car rental is needed, please complete the information below.

City: \_\_\_\_\_ Number of days: \_\_\_\_\_

Is any portion of this trip personal? If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_

### Section IV- Signature and Approval

\_\_\_\_\_  
Officer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director or President of GWRRA Signature

\_\_\_\_\_  
Date