STEAMSHIP REQUEST FORM

COMBO: ACCOUNT: COURSE: SESSION:

Today's Date:_____

Requesting Coordinator:_____

Name of Course:_____

Course Date(s):_____

Instructor Names:_____

_____

This course is being held at: ☐ Nantucket ☐ Martha's Vineyard

Name of Fire Department holding course:_____

Hyannis to Nantucket: ☐
Woods Hole to Oak Bluffs: ☐
Woods Hole to Vineyard Haven: ☐
Vehicle/Equipment being transported:_____

_____

If Applicable
Personal Vehicle: Year: _____ Make: _____ Model: _____ Lic Plate#:_____

Additional Info:_____
Height of vehicle Weight of vehicle length of vehicle

Requested Date:_____Requested Time of Departure:_____

Requested Return Date: _____Requested Return Time:_____

Vehicle Confirmation Number:_____

Confirmation Date:_____ Confirmed Time:_____

Confirmed Return Date:_____Confirmed Return Time:_____

Estimated Cost: $_____

Signature of Approval:_____

A complete copy of this request has been sent to: _____Date:_____

Coordinator: ☐ Business Office: ☐
Instructor: ☐ Cancellation Notification: ☐