

**THE ACTION PROGRAM OFFICE
OWNER VEHICLE WAIVER**

I/we _____ will be using my/our
(print name or names)

personal automobile, a _____, for an
(year make model)

Action Division trip to _____, traveling from
(city, state of destination)

_____ to _____, _____.
(first date of trip) (last day of trip) (year)

I/we understand that in the event of my/our vehicle breaking down and needing repair, the People of Praise Inc. assumes a maximum financial responsibility of \$300.00 plus the cost of towing my/our vehicle to the nearest repair facility.

Signature

Signature

*** Please return to: The Action Program Office
1442 Yale Avenue, Shreveport, LA 71103 ***