



Transportation Request Policy

In order for a team to receive transportation to a sanctioned Special Olympics Washington event they must first have an approval from their Area Director. This is done by submitting a Transportation Request Form. This form will have to be filled out minimum two weeks before the event the transportation will be used.

The types of transportation requests you could receive:

Rental Cars/Vans (Enterprise)

Bus (First Student/Charter)

Personal Vehicles (Gas Reimbursements)

Special Olympics Washington will not pay for unapproved transportation prior to an event. Those that request transportation will need to show that they have been approved by issuing a PO Number to the agency they are renting from. This will come from the Area Director and issued back to the program coordinator on the Transportation Request Form.

For this to be issued to the Program Coordinator the form must include all contact information, type of transportation and the estimated cost or a quote from the renting agency.



Transportation Request Form

The SOWA Transportation Form is used to plan and schedule transportation to and from tournaments and competitions. Please complete the form entirely and submit it to your Area Director or identified Area Leadership team member. All Special Olympics Washington transportation arrangements must be approved prior to transportation use. Special Olympics Washington will not pay for unapproved transportation expenses. Regardless if transportation arrangements have been made on your own, you must complete it and submit it. Furthermore, unless otherwise communicated, transportation reservations are the responsibility of the local program needing vehicles for the games. There will be times when team's preferred mode of transportation will be altered to be more cost efficient for the organization. **(Check box or print clearly)**

Transportation for:

- Winter Season Spring Season Summer Season Fall Season
 Winter Games Spring Games Summer Games Fall Games

Team Name _____

Head Coach _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Event Destination _____ Departure Date _____

Departure Location _____ Departure Time _____ am / pm

Departure Address _____ Total Number of Passengers _____

Check preferred transportation: Bus Rental Vehicle Personal Vehicle

Anticipated Expense: _____

For Office Use Only:

Approved: SOWA Manager _____ Date _____

Purchase Order Number _____ Bus or Rental Company _____