

# VEHICLE INSURANCE FORM

*Use this form for all of the vehicles to be used by your family*

Make, model and year of vehicle: \_\_\_\_\_

\_\_\_\_\_

Number of passengers: (seatbelts required for each passenger) \_\_\_\_\_

\_\_\_\_\_

Number of seatbelts in vehicle: \_\_\_\_\_

\_\_\_\_\_

Owner's name, Driver's License & State \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Liability Insurance: \_\_\_\_\_

\_\_\_\_\_

Name of insurance company: \_\_\_\_\_

\_\_\_\_\_

Minimum bodily injury (per person): \_\_\_\_\_

\_\_\_\_\_

Minimum bodily injury (per occurrence): \_\_\_\_\_

\_\_\_\_\_

Minimum property damage (per occurrence): \_\_\_\_\_

\_\_\_\_\_

**BOY SCOUTS OF AMERICA**

Pack 164

Palmdale, CA 93551