

FLWO Driver's Statement

I have received and read a copy of the Vehicle Operator's Guide for the use of Smithsonian Institution/FLWO passenger vehicles in Arizona. I agree to the specified conditions.

Date: _____

Signature: _____

Print name: _____

Affiliation: _____

Address: _____

Office phone: _____

Email address: _____

Return signed form along with a copy of your automobile driver's license **(front and back)** to:

Linda Jorn or Sue Demski-Hamelin
Whipple Observatory SAO

Email: ljorn@cfa.harvard.edu sdemski-hamelin@cfa.harvard.edu
Fax: 520-879-4412 617-495-7467