



Vehicle Registration
Caring House, Inc.

Guest: _____

Vehicle Make: _____

Vehicle Model: _____

Vehicle Color: _____

License Plate State: _____

License Plate Number: _____

Caregiver 1: _____

Vehicle Make: _____

Vehicle Model: _____

Vehicle Color: _____

License Plate State: _____

License Plate Number: _____

Caregiver 2: _____

Vehicle Make: _____

Vehicle Model: _____

Vehicle Color: _____

License Plate State: _____

License Plate Number: _____