

VOLUNTEER DRIVER INFORMATION SHEET

I. Driver: Name _____ Date of Birth _____
Address _____
Phone _____
Driver's License # _____ Exp. Date _____

II. Vehicle that will be used:

Name of Owner _____
Address of Owner _____
Year, Make and Model _____
License Plate _____ Registration Expires _____

If more than one vehicle is to be used, requested information must be provided for each vehicle.

III. Insurance Information: When using a privately owned vehicle, the insurance coverage is the limits of the insurance policy covering that specific vehicle.

Insurance Company _____
Policy Number _____
Expiration Date _____
Liability Limits of Policy * _____

*Please note: The minimal, acceptable liability limit for privately owned vehicles is \$250,000/\$500,000.

IV. Certification

I certify that the information given on this form is true and correct to the best of my knowledge.

I understand that as a volunteer driver, I must be 21 years of age or older, hold a valid driver's license, and have the required insurance coverage in effect on any vehicle used to transport students. I understand seat belts must be worn by all participants at all times!

(Signature)

(Date)