VOLUNTEER DRIVER INFORMATION SHEET

I. Driver:	Name	Date of Birth	
			Phone
	Driver's License #		
II. Vehicle	that will be used:		
	Name of Owner	Year	and Make
	Address of Owner		
		Model	
	License Plate	Registration Expires	Inspection Expires
-			(Buses only)
If more tha	n one vehicle is to be u	sed, requested information mu	st 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)