

VOLUNTEER DRIVER INFORMATION FORM

If private vehicles are being used, this form **MUST** be submitted with the Youth Travel & Guidelines form. Your insurance is the primary carrier in the event of an accident.

1. Driver:

Name _____ DOB _____
Address _____ Social Security # _____

_____ Phone # _____

2. Vehicle that will be used:

Name of Owner _____ Year & Make _____

Address _____ Model _____

_____ License Plate _____
_____ Registration Expires _____ Inspection Expires _____

3. 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 required minimum liability limits for privately owned vehicles is \$100,000/\$300,000. An additional \$1 million umbrella is recommended, though not required.

4. 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 agree to follow all rules of the road and the guide-lines regarding supervision of minors.

Signature: _____

Date: _____