

Field Trip Driver Information Sheet

(This form will be on file in the school office)

Driver:

Name: _____ Date of Birth: _____
Address: _____

Phone: _____
Driver's License: _____ Exp. Date: _____

Vehicle that will be used:

Name of Owner: _____
Address if different from above: _____
Model of Vehicle _____ Make of Vehicle: _____ Year of Vehicle _____
License Plate #: _____ Date of Expiration: _____
Registration Expiration Date: _____

Insurance Information

When using a privately-owned vehicle, the insurance coverage is the limit of the insurance policy covering the at specific vehicle.

Insurance Company: _____
Policy # _____
Date of Policy Expiration: _____
Liability Limits of Policy: _____

*Please note: The minimal, recommended liability limit for privately-owned vehicles is \$100,000/\$300,000.

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, possess a valid driver's license, have the proper and current license, and vehicle registration , and have the required insurance coverage in effect on any vehicle used to transport students.

Signature

Date