

Parent Driver Information Sheet

Driver

Name: _____

Date of Birth _____

Address: _____

Home Phone _____

Cell Phone _____

Driver's License # _____

Date of Expiration _____

Vehicle That Will Be Used

Name of Owner _____

Model of Vehicle _____

Address of Owner _____

Make of Vehicle _____

Year of Vehicle _____

Insurance Information

Insurance Company _____

Liability Limits of Policy _____

(* Please note: The minimal, acceptable limit of privately owned vehicles is \$100,000/\$300,000)

In order to provide for the safety of the parish/school/agency and those we serve, we must ask each driver to answer the following questions.

TRUE OR FALSE

1. I have not had a conviction for an infraction involving drug or alcohol (such as driving under the influence or driving while intoxicated) In the last three years

2. I have not had two or more convictions for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) In the last seven years.

3. I have had no more than three moving violations or accidents in the past three years.

Please be aware that as a driver, your insurance is primary unless vehicle is owned by church/agency/school.

Certification

I certify that the information given on this form is true and correct to the best of my knowledge. I understand driving for Church/School/Agency ministry is a profound responsibility and I will exercise extreme care and due diligence while driving. I understand that as a 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. I agree that I will refrain using a cell phone or any other electronic device while operating my vehicle

Print Name _____

Signature _____

Date _____