



# FIELD TRIP TRANSPORTATION BY VOLUNTEER DRIVER

## ARCHDIOCESE OF WASHINGTON – Catholic Schools

*Important: All volunteer drivers to transport students for a school-approved field trip or other off-site curricular activity, this form must be completed and signed by the adult volunteer, who must also be in compliance with the archdiocesan Child Protection Policy.*

### Volunteer Driver Information

Driver's Name: \_\_\_\_\_ Sex:  Male  Female Birth Date: \_\_\_\_\_  
Print Legal Name mm/dd/yyyy

Home Address: \_\_\_\_\_  
Street Address Suite #

Social Security No: \_\_\_\_\_ - - Alt. Phone: ( ) - \_\_\_\_\_  
City State ZIP Code **Ext.**

Driver's License No: \_\_\_\_\_ Issuing State: \_\_\_\_\_

### Vehicle Information

*Complete the following information pertaining to the vehicle that will be used to transport students for the field trip::*

Name of Owner: \_\_\_\_\_ Is the Driver the Owner of the Vehicle?  YES  NO

Owner Address: \_\_\_\_\_  
Street Address Suite #

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_  
City State ZIP Code

License Plate No: \_\_\_\_\_ Expiration: \_\_\_\_\_ Registration Expiration Date: \_\_\_\_\_  
mm/dd/yyyy mm/dd/yyyy

### Insurance Information

*Complete the following information pertaining to the insurance on the vehicle that will be used to transport students for the field trip:*

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Date of Policy Expiration: \_\_\_\_\_ Liability Limits of Policy\*: \_\_\_\_\_  
mm/dd/yyyy **\*The minimum acceptable liability limits for any personally owned vehicle used on a parish, school or archdiocesan activity or field trip is \$100,000 per person and \$300,000 per occurrence.**

Including the Driver, how many passengers may be safely and legally transported? \_\_\_\_\_

**The use of 11-15 passenger vehicles is strictly prohibited and cannot be used to transport students.** Please be aware that if you are using a personally-owned vehicle, the insurance coverage for that vehicle is primary. You can increase your liability coverage above these limits prior to the trip by contacting your automobile insurance carrier.

To further safeguard the safety of our students and other members of the parish and those we serve, the volunteer driver must list all accidents or moving violations received within the past five (5) years:

\_\_\_\_\_

\_\_\_\_\_

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 with at least three (3) years experience driving the type of vehicle to be used, possess a valid driver's license, and if using a personally-owned vehicle, confirm that the vehicle carries the required insurance, a valid registration and is properly tagged. I also acknowledge that I am in compliance with the Archdiocese of Washington Child Protection Policy

Signature of Volunteer Driver:

Date: