

## 2022 - 2023 Volunteer Driver Form

I plan to volunteer this school year as a driver for the Palm Valley School for any School sponsored event or field trip.

I understand that I shall assume responsibility for the children I transport from the time we leave school until we return while they are in my car.

I understand that it is my responsibility to ensure that all children riding in my vehicle are secured with a seatbelt at all times, there will be no double seating. In addition, I understand that children must be secured in an appropriate child passenger restraint (safety seat or booster seat) in the back seat of the vehicle until they are at least 8 years old or weigh at least 80 pounds. I also agree that my vehicle will be in safe operating condition.

I understand that I have to carry the minimum of \$100,000 property /\$300,000 bodily injury liability vehicle coverage and agree that this coverage has to be in place at all times during the course of volunteering to drive and while transporting students and <u>will</u> <u>attach a copy of the declaration insurance policy to this form reflecting the limits of liability (declarations page).</u>

I understand that in the event of an accident, my insurance company is the primary agent liable for suit. Palm Valley School provides no insurance protection for physical damage to my vehicle or loss or damage to its contents.

I agree to release the school from any and all liability for property damage to my car or any of its contents, and any and all liability that results from an accident or incident that causes bodily injury or property damage.

I further agree that the information provided on this form is true and correct to the best of my knowledge. I understand the School will require basic screening of my driving record on an annual basis. (No one may drive with citations valued at more than 2 points: a Driving Under the Influence or 1 at-fault accident). All drivers must be 21 years of age or older and have had their license for at least 3 years.

Please complete the following information concerning the automobile(s) that will be used to transport students.

1.	Make of Vehicle:	_
2.	Model of Vehicle:	
3.	Number of passenger seatbelts:	

4.	License plate number:	
5.	Name of my insurance company (not b	proker):
6.	Policy number and expiration date of Declaration Copy	my current policy: Please Attach Insurance
7.	Name of Driver #1 (please print):	
	Driver's License Number:	State
	Expiration Date	Class
	If your license is out-of-state please in	clude your Middle name
	D.O.B and Address on	the License
8.	Name of Driver #2 (please print):	
	Driver's License Number:	State
	Expiration Date	Class
	If your license is out-of-state please in	clude your Middle name
	D.O.B and Address on	the License
	ny responsibility to inform the Schoo g record or if I get a new or different car	of any changes to my insurance policy during the school year.
	• •	/ record check using the information giver antee I'll be able to drive to events or field
	reading and reviewing the volunteer n of this memo and return the entire me	driver form, please complete the bottom mo.
contai		river form and understand the information have any questions or concerns about any see as soon as possible.
	Parent's Signature / Driver #1	Date
	Parent's Signature / Driver #2	Date
	Student's Name (Please Print)	Grade