

VOLUNTEER DRIVER FORM

(Drivers must be 21 years of age or older)

TO BE A VOLUNTEER DRIVER FOR ST. MARY CATHEDRAL SCHOOL, YOU MUST ALSO COMPLETE THE ATTACHED ***Diocese of Gaylord Volunteer Criminal Background Check Authorization and Release Form*** (All information is confidential and maintained through the Diocese)

I, (driver's name) _____, understand that drivers must rely on their own personal liability insurance for protection against negligence suits. Under the current interpretation of Michigan No-Fault Insurance, a child's parents' insurance covers him/her in case of injury while riding in my automobile. Any driver and/or owner of a private automobile is responsible for liability incurred on an educational trip just as he or she would be in the normal operation of the vehicle.

Drivers are responsible for seeing that passengers are appropriately seated and use seat belts. No student passenger under the age of 12 should ride in the front seat. Drivers must wear seat belts, may not smoke at all during the trip, and may not use cell phones while driving.

I. Driver Information:

Address: _____ Date of Birth: _____

Soc. Sec. No.: _____

License No.: _____

II. Vehicle that will be used:

Name of Owner: _____ Year and Make: _____
Address of Owner: _____ Model: _____

License Plate: _____
Registration Expires: _____ Inspection Expires (if applicable) _____

If more than one vehicle is to be used, information must be provided for each vehicle.

Name of Owner: _____ Year and Make: _____
Address of Owner: _____ Model: _____

License Plate: _____
Registration Expires: _____ Inspection Expires (if applicable) _____

(OVER)

III. Insurance Information: The insurance coverage for a privately owned vehicle is the limit of the insurance policy covering that specific vehicle.

Insurance company: _____

Policy No.: _____

Expiration Date: _____

Liability Limits of Policy*: _____

***Please Note:** The minimal, acceptable liability limit for privately owned vehicles is \$500,000 CSL (Combined Single Limit). Due to some insurers limitations, limits of \$250,000 per person/\$500,000 per occurrence is acceptable.

IV. 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 hold a valid driver's license and have the required insurance coverage in effect on any vehicle used to transport students, co-employees, service recipients and/or act on behalf of the church or related entities.

(Signature)

(Date)