

SACRED HEART SCHOOL

FIELD TRIP (DRIVER INFORMATION SHEET)

DRIVER

I. Name _____ Date of birth _____
Address _____ Social Security # _____

Phone _____
Driver's License# _____ Date of expiration _____

VEHICLE THAT WILL BE USED:

II. Name of owner _____ Model of vehicle _____
Address of owner _____ Make of vehicle _____

Year of vehicle _____
License plate # _____ Registration exp. date _____

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

INSURANCE INFORMATION:

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

Insurance Company _____
Policy # _____
Date of policy expiration _____
Liability limits of policy* _____

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

CERTIFICATION

IV. 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 _____