

VOLUNTEER DRIVER FORM

Name of Driver: _____

Address: _____

CITY: _____ State: _____ ZIP: _____

Driver's License #: _____ State Issued: _____

Vehicle information: _____
Year Make Model

Insurance Company's Name _____

Liability Limits: _____
(Minimum Limits of \$100,000/\$300,000 Required)

Certificate of Completion for Be Smart – Drive Safe attached Yes: _____ No: _____

In order to provide for the safety of those we serve, we must ask each volunteer to answer the following questions:

- | | <u>TRUE</u> | <u>FALSE</u> |
|--|-------------|--------------|
| 1. I have NOT had a conviction for an infraction involving drugs 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 no more than three moving violations or accidents in the last three years. | _____ | _____ |

Please be aware that as a volunteer driver, your insurance is primary.

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 ministry is a profound responsibility and I will exercise extreme care and due diligence while driving. 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. I agree that I will refrain from using a cell phone or any other handheld electronic device while driving my vehicle.

Volunteer Driver Signature

Date

Thank you for helping us with our transportation needs.