



Volunteer Driver Disclosure & Release Form

A copy of your driver's license and car insurance information must be included with this form.

This information will need to be updated when any part of it changes, expires or the next school year, whichever is first.

Volunteer Driver Information

Driver's Name _____

Driver's License #: _____ Issuing State: _____

Car Insurance Company: _____ Policy # _____

Policy Holder Name: _____ Exp. Date: _____

Vehicle #1 Information

Please list only those vehicles in which you plan to transport students.

Make: _____ Model: _____ Year: _____

License Plate # _____

Maximum number of seat belted passengers (not including driver) _____

Vehicle #2 Information

Please list only those vehicles in which you plan to transport students.

Make: _____ Model: _____ Year: _____

License Plate # _____

Maximum number of seat belted passengers (not including driver) _____

Have you had more than three moving violations or accidents in the last three years?

Yes / No (please circle)

If yes, please list date and details for each event:

Driver Declaration

My signature below certifies:

- All above information is accurate.
- I will obey all traffic laws.
- I understand that my insurance is responsible for liability in the case of an accident.
- I will notify Libertas Christian School of any vehicle or insurance changes.
- I will require all students to be seated and secured with individual working seatbelts.
- Every child under 8 years old and under 4'9" tall will ride in an appropriate child restraint (Booster seat, car seat, or other federally approved device). I will maintain a "road-safe" vehicle and have it in good repair.
- I will not utilize a cellphone for any reason while the vehicle is in gear.
- I will, when driving for service projects, remain on site as a representative supervisor for Libertas Christian School.

Driver's Signature: _____

Date: _____

Office Use Only:

Received copy of valid

Driver's License _____

Vehicle #1 Insurance _____

Vehicle #2 Insurance _____

Date Received _____ Initials: _____