ENCINITAS UNION SCHOOL DISTRICT

 E 3541.1

# Volunteer Information Form to Provide Transportation by Private Vehicle

Dear Volunteer:

The following event is scheduled for the children at our school. If you are interested in helping us by transporting students off-campus, please complete and return this form. Thank you for your support.

Date of Trip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Destination \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time of Departure \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Return \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requirements**

**Please initial each of the items below to indicate agreement:**

\_\_\_\_\_\_ I am at least 21 years old.

\_\_\_\_\_\_ I will provide and ensure the use of a seatbelt by all passengers and myself.

\_\_\_\_\_\_ I will carry only the number of passengers for which my vehicle was designed and in no case

 will I carry more than nine passengers.

\_\_***\_\_***\_\_ I will ensure that every child under the age of 8 who is under 4’9” tall will be secured in a booster seat in the back seat. Any child under the age of 8 who is 4’9” or taller may be secured by a safety belt in the back seat.

\_\_\_\_\_\_ I performed a safety check of my vehicle’s tires, brakes, lights, horn, and suspension and

 found all items to be in safe working order.

\_\_\_\_\_\_ I will drive directly to and from the field trip location without making any unscheduled stops.

\_\_\_\_\_\_ I will only drive to a field trip destination within 50 miles of Encinitas.

\_\_\_\_\_\_ I will not smoke a pipe, cigar, or cigarette while there are minors in the vehicle, as required by

 law.

\_\_\_\_\_\_ I will obey all traffic laws.

**Please initial to indicate that each of the following items are attached to this form:**

\_\_\_\_\_\_ A copy of my valid California driver’s license. Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ A copy of my car’s registration. Expiration Date \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ Verification of my good driving record from the DMV (no indication of concerns) or a good driver notice from my insurance carrier (needs to be renewed every six months). Recheck Date \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ A copy of my insurance policy indicating the following minimal coverage:

 Bodily injury - $100,000/$300,000 per accident

 Property Damage - $50,000 per accident

 Medical Payments - $2,000 per accident

 Policy Expiration date \_\_\_\_\_\_\_\_\_\_\_\_

I agree to these requirements, have attached copies as requested, and am available to drive on the field

trip indicated above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print name here. Please sign name here.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**This form and all attachments must be reviewed and updated prior to each field trip.**