



Volunteer Driver Form

Name of Driver _____

Address _____

City _____ State _____ Zip _____

Driver's License Number _____ State Issued _____

Year, Make, Model of Vehicle _____

Insurance company's name _____

Agent's name _____

Have you had citations or convictions of any of the following in the last three years:

- | | YES | NO |
|---|-----------------------|-----------------------|
| a) Driving under the influence of alcohol or drugs | <input type="radio"/> | <input type="radio"/> |
| b) Hit & Run | <input type="radio"/> | <input type="radio"/> |
| c) Failure to report an accident | <input type="radio"/> | <input type="radio"/> |
| d) Negligent homicide arising out of the use of a motor vehicle | <input type="radio"/> | <input type="radio"/> |
| e) Using a motor vehicle for the commission of a felon | <input type="radio"/> | <input type="radio"/> |
| f) Permitting an un-licensed person to drive | <input type="radio"/> | <input type="radio"/> |
| g) Reckless driving | <input type="radio"/> | <input type="radio"/> |
| h) Participating in a speed contest or illegal race | <input type="radio"/> | <input type="radio"/> |

In order to provide for the safety of our young people, other members of the parish, and those we serve, we cannot use your services as a volunteer driver if you do not have a current valid drivers license and insurance on your vehicle. If you answered "yes" to any of the questions concerning the citations and convictions, we must also disqualify you as a volunteer driver.

It is expected that all of our volunteer drivers will abide by the Tennessee seat belt law.

Please be aware that as a volunteer driver, your insurance is primary. There is a policy that would offer additional liability should a claim exceed the limits of your policy.

THANK YOU FOR HELPING US WITH OUR TRANSPORTATION NEEDS

Volunteer Driver

Church Representative