

INSURANCE VERIFICATION FORM AND VOLUNTEER TRANSPORTATION AGREEMENT

The Central California Conference of Seventh-day Adventists requires that each volunteer driver be 21 years or older; have NO at fault accidents on their active driving record, and have no more than 2 moving violations on their active driving record.

... AND furnish the following information, for approval prior to driving on its behalf: copy of valid driver's license, copy of insurance ID card showing effective dates of insurance coverage and copy of insurance declaration page showing limits of Insurance.

I, the undersigned, volunteer to drive my personal vehicle to provide transportation for ______ during the ______ school year to and from approved school events*.

1. Name (printed)			Date of Birth	
2. Driver's License Number		Expiration Date	Copy of License Yes 🗆	No 🗖
3. Vehicle License Plate/s				
4. Driving History (last 3 years	;)			
Any traffic tickets?	Yes 🗖	No 🗖		
If yes, please describe				
Any accidents your fault?	Yes 🗖	No 🗖		
If yes, please describe				
5. Name of your insurance comp	oany			
Policy Number		Effective dates		
6. Minimum acceptable limits of Coverage Required:			Your Policy Limits	Office Use
Bodily Injury	(Minimum \$100,000 per person / \$300,000 per accident)		\$	
Property Damage	(Minimum \$50,000 per accident)		\$	
OR Combined Single Limit BI/PD (\$300,000)			\$	
Medical Payments		(\$5,000)	\$	
Uninsured Motorists	(Minimum \$30,000 per	person / \$60,000 per accident)	\$	
Copy of insurance ID card sho	owing effective dates of ins	Yes 🗖 No 🗖		
Copy of insurance declaration page showing limits of Insurance			Yes 🗖 No 🗖	

Additionally, I agree that:

I will be responsible for any comprehensive or collision losses or damage suffered by my automobile during the above referenced time period. I shall obey the traffic laws, including the requirement that all passengers use the lap belt and shoulder harness while the vehicle is in transit. If children under the age of eight years and/or under 4' 9" tall are being transported, then an approved car seat shall be used. I am not aware of any defect or mechanical problem with the vehicle that might pose a safety problem.

* Before signing, please note that in accordance with California State Law, the insurance provided by the registered owner of the vehicle is primary. Any insurance carried by the Central California Conference that may be applicable is secondary.

I have read the above and I understand and agree with the above listed requirements and I have been background checked and cleared by the Central California Conference on ______as a chaperone/volunteer. Yes **□** No **□**

*Events must be sponsored by the Central California Conference or an entity within the CCC umbrella.