

**Driver Insurance Form - Field Trips and Athletics**

**Name of Family:** \_\_\_\_\_

Please check here if you are **ARE** available to drive for field trips or school events and sign below to attest that the below information is true (all information will be kept confidential).

\_\_\_\_\_  
(signature) father / guardian

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(signature) mother / guardian

\_\_\_\_\_  
(date)

Please check here if you **ARE NOT** available to drive for field trips or athletic events.

\*Please note - parents are responsible for arranging transportation for their children to and from athletic practices and games.

\*This form must be completed in full for you to be able to drive other students for field trips and school events. Our insurance company requires this information to be on file for all drivers.

(Father's info)

(Mother's info)

<b>Parent / Guardian Name</b>		
<b>Driver's License Number</b>		
<b>Vehicle License Plate Number</b>		
<b>Vehicle Make &amp; Model</b>		
<b>Name of Insurance Provider</b>		

(Check One)

**Policy Number:** \_\_\_\_\_ **Is the policy current?** \_\_\_YES / \_\_\_NO

Have you ever committed or been charged with any criminal offenses? \_\_\_YES / \_\_\_NO

\*If yes, please explain:

Have you ever had a problem with substance abuse or alcohol abuse? \_\_\_YES / \_\_\_NO

\*If yes, please explain:

In the past 12 months have you received a citation for any moving violations? \_\_\_YES / \_\_\_NO

\*If yes, please explain:

In the past 12 months have you been the driver of a vehicle that has been in an accident? \_\_\_YES / \_\_\_NO

\*If yes, please explain: