VOLUNTEER DRIVER FORM

Na	me of Driver:			
Ac				
Dr	ivers License #:	State Issued:		
Υe	ear, Make & Model of Vehicle:			
Ins	surance Company's Name:			
	ability Limits:	<i>d</i>)		
	order to provide for the safety of those we llowing questions:	e serve, we must ask each vol		
			<u>TRUE</u>	<u>FALSE</u>
1.	I have NOT had a conviction for an infraction in (such as driving under the influence or driving w in the last three years.			
2.	I have NOT had two or more convictions for an i or alcohol (such as driving under the influence or in the last seven years.			
3.	I have had no more than three moving violations last three years.	or accidents in the		
	Please be aware that as a vo	olunteer driver, your i	nsurance is	s primary.
Th	ank you for helping us with our transporta	ntion needs.		
<u>Ce</u>	ertification			
un an or reg	ertify that the information given on this for derstand driving for Church ministry is a defeated driving. I understant older, possess a valid driver's license, has gistration, and have the required insurancy frain from using a cell phone or any other	profound responsibility and I nd that as a volunteer driver, ve the proper and current lice e coverage in effect on any ve	will exercise ex I must be 21 yearnse and vehicle whicle. I agree t	streme care ars of age that I will
	Volunteer Driver Signature	Date		