

PRIVATE VEHICLE TRANSPORTATION POLICY 2017-2018

Each time students are transported by private vehicles at Foothills Christian Middle School, the driver is required to have a completed and approved statement form on file. In order to protect the interests of both you and the school, the following information must be on file before the field trip takes place.

The school principal will only approve the use of a private vehicle to transport childre	n after the driver has completed and sig	ned this form!	
nameBirthdate (must be over 21)			
Driver's License number	Expiration Date		
Do you have any physical conditions, or are you taking any medication Yes No	which would affect driving safely	?	
Have you been cited for a moving violation and/or accident within the	past year?	Yes	No
If yes, give date of incident and explain.			
Year and make of vehicle	License Plate #		
Do you have liability insurance?Yes	No		
Name of Liability Insurance Company			
Policy #	Exp. Date of policy		
LIMITS OF POLICY: Bodily Injury:	Per person:	Per Accident :	
Does your vehicle have any known mechanical or safety deficiencies?	Yes	No	
How many working seat belts are in your vehicle?	Seating capacity of vehicl	e	
In case of an accident or claim, your insurance listed above provides your only knowledge.	coverage. I certify that the answer	s provided are true and corr	ect to the best of my
Signature of driver		Date:	
Approved Signature of Principal		Date:	