

**San Jose Christian School**

**Insurance Verification Form & Volunteer Transportation Agreement**

**School Year** \_\_\_\_\_

I volunteer to drive my personal vehicle to provide transportation for San Jose Christian School. Our liability insurance carrier requires that each volunteer driver furnishes the following information, for approval prior to driving on its behalf.

- 1) Copy of Valid Drivers License.
- 2) Copy of Insurance ID card showing effective dates of insurance coverage.
- 3) Copy of Insurance Declaration page showing limits of Insurance.

**Suggested Minimum Limits**

Bodily Injury	\$100,000 per person/ \$300,000 per accident
Property Damage	\$25,000 per accident
Or Combined Single Limit BI/PD	\$300,000
Medical Payments	\$5,000
Uninsured Motorist	\$30,000 per person/\$60,000 per accident

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 6 years or weighing less than 60 pounds 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 organization that may be applicable is secondary.

Student Name \_\_\_\_\_ Grade\_\_\_\_ A/B

Student Name \_\_\_\_\_ Grade\_\_\_\_ A/B

Student Name \_\_\_\_\_ Grade\_\_\_\_ A/B

Student Name \_\_\_\_\_ Grade\_\_\_\_ A/B

I have read the above and I understand and agree with the above listed requirements.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Vehicle Description