



# Volunteer Driver Agreement

Please complete the following form to become a trip driver authorized to transport Prairie Sky School students participating in planned school activities, events and field trips for the school year. Drivers must have a valid license and five (5) years of driving experience; vehicles must have valid insurance.

Please be aware that Prairie Sky School's Excess Liability Insurance comes into effect only after the trip driver's insurance has been exhausted. The trip driver must provide the school with prompt written detailed notice of any accident arising from driving during a trip on business of the school.

## Parent/Guardian Information

Name: \_\_\_\_\_ Driver License #: \_\_\_\_\_

## Vehicle Information

Make/model: \_\_\_\_\_ Year: \_\_\_\_\_ Vehicle insurance(expiry): \_\_\_\_\_

License Plate #: \_\_\_\_\_ How many students can you fit in your car with seatbelts? \_\_\_\_\_

Please provide both of the following:

1. **Drivers Abstract**       Yes                       No

2. **Criminal Record Check**    Yes                       No

## Declaration to be signed by the Driver

I declare that I am licensed in Saskatchewan and my vehicle has valid automobile insurance. The vehicle is mechanically fit and there are seatbelts in working condition for all passengers. Seatbelts and/or car-seats are required at all times as applicable for the age and size of the children in the vehicle. I will follow the manufacturer's vehicle guidelines regarding air bags and acknowledge that children should not be seated in the front seat of any vehicle, especially under the age of 10.

Name of Parent/Guardian (printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(dd/mm/yy)



## **Use of 3<sup>rd</sup> Party Vehicle**

Declaration to **be signed** by the **owner of the vehicle, if the volunteer does not own the vehicle:**

I declare that I have authorized \_\_\_\_\_ to drive my vehicle to transport children participating in the field trips. He/she is licensed to carry passengers and is fully insured under the vehicle liability insurance.

Name of Owner (printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(dd/mm/yy)