

Fountain Hills Charter School Volunteer Driver Requirements and Registration

Dear Parent Volunteer Driver,

Your willingness to use your vehicle to transport students on a school-related function is very much appreciated. To ensure the safety of all students, volunteer drivers must meet the following requirements when driving their own vehicle. If you fulfill these safety requirements, you may proceed with this application.

1. Have a valid Arizona Driver's License, and be at least 21 years of age.
2. Not have received more than one moving violation in the past 12 months, or more than two in the last 36 months.
3. Not have received any DUI violations (driving under the influence of alcohol or drugs).
4. No felony convictions involving the use of a motor vehicle.
5. Have insurance coverage with a minimum of:
 - \$100,000 per person/ \$300,000 per occurrence for bodily injury, (\$500,000 for vehicle with more than 5 passengers)
 - \$50,000 property damage per occurrence
 - \$5,000 per person for medical payment
6. Drive a safe vehicle, have as many passenger seat belts as passengers.

Volunteer Driver Registration

(In order to volunteer to drive, the completed form must be approved by FHCS Administration)

First Name:	Middle Name:	Last Name:
Valid Driver's License Number:		Expiration Date:
Number and Nature of DMV Violations on Record:		
Year and Make of Car:		License Plate Number:
Name of Insurance Company:		
Name of Agent :		Agent's Phone Number:
Current Auto Policy Number:		Expiration Date:
Coverage Limit: Bodily Injury: \$	/ \$	Property: \$ Medical: \$
Number of Working Seat Belts:		

I certify the above information is correct and the insurance coverage on the above vehicle is in force. I further certify that the above vehicle is mechanically safe. I understand that I must have liability insurance coverage in force and agree to advise FHCS, in writing, of any changes in the above information. I further understand that I must proceed directly to and from the field trip destination, and that no unauthorized stop shall be made. I will respect all current traffic laws. I understand that I shall not have a child as a sole passenger except if the child is my own. I understand that when driving my own vehicle on school-related business, including field trips, and I am involved in an accident, my insurance is used. FHCS does not cover, nor is responsible for, comprehensive and collision damage to my vehicle.

I have read and understood the Volunteer Driver Requirements and the Field Trip Policy.

Driver's Name: _____ Driver's Signature: _____ Date: _____

Child's Name: _____ Teacher: _____

Approved: Y N Administrator's Signature: _____

*** Please attach a copy of the driver's current insurance I.D. card and driver's license.**