



# FIELD TRIP VOLUNTEER DRIVER FORM

|   |                 |   |
|---|-----------------|---|
| Building  | Student's Name  | School Year   |
| Driver's Name                                       | Phone Number    | Will you have a cell phone with you? <input type="checkbox"/> yes <input type="checkbox"/> no<br>Cell phone number: _____ |
| Driver's Address                                    | City            | State Zip   |
| Driver's License #                                  | Expiration Date |   |
| Type of Vehicle                                     | # of Seat Belts | License Plate Number  |
| Owner of Vehicle                                    | Address         |   |
| Vehicle Insured by (Company Name and Policy Number) | Address         |   |

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|---|--|
| <ol style="list-style-type: none"> <li>The vehicle I will be driving is in proper working condition.</li> <li>I am covered by a no fault insurance policy as required by the State Of Michigan.</li> <li>I have a valid driver's license.</li> <li>I am 21 years of age or older and/or the parent of a child attending the field trip.</li> <li>I have not received a moving violation traffic ticket during the three years prior to the date of the field trip.</li> </ol> | <ol style="list-style-type: none"> <li>I have completed and submitted a Field Trip Volunteers and Chaperones Criminal Conviction History form.</li> <li>I will ensure that any child:             <ol style="list-style-type: none"> <li>who is less than 4 years of age is properly secure in a child restraint (booster seat) system.</li> <li>who is 4, 5, 6, or 7 years of age AND who is less than 4 feet 9 inches in height is properly secure in a child restraint (booster seat) system.</li> <li>who is 8 years of age or older is properly secure in a safety belt.</li> </ol> </li> </ol> |
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|---------------------|------|
| Signature of Driver | Date |
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FT-007 04/03



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