

## **VOLUNTEER DRIVER AGREEMENT**

Return Completed Form to Parish/School/Ecclesiastical Organization

l,	, do hereby affirm that the following statements are true:
I have a valid driver's license which has not been suspended or revoked during the past five years.	
I understand that as a volunteer driver, my insurance is primary. I have in full force and effect automobile liability insurance valid in the State of Colorado and do carry with me at all times proof of such insurance.	
I have not been convicted of or pleaded guilty to driving under the influence of alcohol, driving while ability impaired, or reckless driving during the past five years.	
I volunta all times	arily accept responsibility to provide transportation, and I accept responsibility for the safety of my passengers, and at s I agree to:
1.	Use and insist that all passengers use seatbelts;
2.	Drive carefully within established speed limits and driving conditions;
3.	Keep my vehicle in safe operating condition;
4.	Never drink any alcoholic beverages or take any drug which may inhibit my driving ability within eight (8) hours before transporting any passengers; and
5.	Obey all traffic laws.
	Date Signature of Driver
	I have a copy of proof of insurance for the driver named above.
	I have a copy of the valid driver's license for the driver named above.
	Date Attested by Pastor or Supervisor

RISK MANAGEMENT AND INSURANCE MANUAL

Appendix IX.A(1)