Commercial carrier or contracted transportation is the most desirable method to be used for distance trips and, whenever possible, this mode of transportation should be provided. The use of private passenger vehicles is discouraged and should be avoided if at all possible. If commercial carriers are used (e.g., buses or vans) no further information is required. However, if transportation is contracted, signed contracts should be executed with an appropriate hold harmless agreement protecting the parish and the Diocese. Also contracted carriers should provide proof of insurance with minimum limits of liability of $500,000 CSL (Combined Single Limit).

**LEASED VEHICLES**

If a vehicle is leased, rented or borrowed to transport participants to and from an event, appropriate insurance should be obtained. Coverage can be purchased through the rental company or your local agent. **Coverage cannot be automatically assumed for leased, rented or borrowed vehicles.**

**PRIVATE PASSENGER VEHICLES**

If a private passenger vehicle must be used, then the following information must be supplied and this information must be certified by the driver in question (see Volunteer Driver Information Sheet).

1. The driver must be 21 years of age or older.
2. The driver must have a valid, non-probationary driver's license and no physical disability that could in any way impair his/her ability to drive the vehicle safely.
3. The vehicle must have a valid and current registration and valid and current license plates.
4. The vehicle must be insured for the following minimum limits: $100,00 per person/$300,00 per occurrence. Note that the vehicle owner’s insurance provides primary coverage should a mishap occur.

A signed **Driver Information Sheet** on each vehicle must be obtained prior to the trip.

Each driver and/or chaperone should be given a copy of the approved itinerary including the route to be followed and a summary of his/her responsibilities.

Note: Vehicles known as 15-passenger vans are **strictly prohibited** for transportation of passengers under this policy.

rev. April 2003
VOLUNTEER DRIVER INFORMATION SHEET

DRIVER
Name of Driver ________________________________________________________________

Address ______________________________________________ City/State/Zip ______________

Phone Number __________________ Date of Birth __________________ SSN ________________

Driver’s License Number ______________ State Issuing License _____ Expiration date ______

VEHICLE TO BE USED
Name of Owner ____________________________ Model of Vehicle ______________________

Address of Owner __________________________________ Make of Vehicle _________________

License Plate # __________________________ Date of Expiration ______________________

Registration Expiration Date __________________

INSURANCE INFORMATION
When using a privately owned vehicle, the insurance coverage is the limit of the insurance policy covering the specific vehicle (identified above).

Insurance company name _________________________________________________________

Policy # ___________________________ Expiration Date of Policy ______________________

Insurance agent’s name and phone number __________________________________________

Liability Limits of Policy ________________________________________________________
(Please note the minimum, acceptable liability limit for privately-owned vehicles is $100,000/$300,000.)

Please be aware that as a volunteer driver your insurance is primary. There is a policy in place that would offer additional liability protection for the Diocese, but not for you, should a claim exceed the limits of your policy.

CERTIFICATION

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that, as a volunteer driver, I must be 21 years of age or older, possess a valid driver’s license, have the proper and current license and vehicle registration, and I have the required insurance coverage in effect on any vehicle used to transport event participants.

Volunteer Driver Signature ______________________________________________________

Date __________________

Parish/School Representative Signature __________________________________________

Date __________________