



Volunteer Driver Screening & Insurance Form

Name of Driver _____

Vehicle Year _____ Make _____ Model _____ Lic# _____

License Exp Date _____ Maximum # of seat belts in vehicle _____

Insurance Co & Policy No _____

Yes	No	Please respond to each question	Violations or At-Faults:
		I am older than 21 years of age.	
		I have a valid Washington State driver's license.	
		I have had not vehicle moving violations or at-fault accidents within the last three years. If you have had any, please list in box at right.	
		I carry minimum auto liability limits of \$100,000 per occurrence and \$300,000 aggregate combined single limit of liability (or \$100,000/\$300,000 Bodily injury; \$50,000 Property Damage) and uninsured motorist coverage.	

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I am aware that, in the event of an accident while on a CLUB-related activity, any claims will be tendered to my personal automobile insurance company, and my insurance is primary.

VOLUNTEER DRIVER CHECKLIST: VEHICLE INSPECTION: Please respond to each item with a yes or no answer.

Yes	No	Check the appropriate box for each item	Yes	No	Check the appropriate box for each item
		There is a working seat belt for the driver and each passenger, and I enforce the wearing of seat belts by all.			My vehicle has a rated capacity of ten passengers or fewer.
		My vehicle's brakes, including the emergency brake, are in good working order.			If my vehicle has dual airbags, I will not seat children under 12 or small persons in the front passenger seat.
		My vehicle's tires have legal tread depth (at least 3/32").			I will not transport students in a motor home, fifth-wheel trailer, cargo compartment of a van or truck bed.
		My vehicle's brake lights turn indicators, and headlights are in good working order.			The above information is true and accurate to the best of my knowledge. I hereby give my permission for a copy of my personal Motor Vehicle Report to be ordered and used in consideration of my transporting players during club trips.
		My vehicle's windows are clear and provide an unobstructed view for the driver.			
		My vehicle has functioning rear view mirrors (center and left side).			
		My vehicle has no other physical defects that would interfere with the safety of the driver and passengers.			

Driver Signature _____ Date _____

Administrative Review

- ☐ If the volunteer will drive more than one day, the club has obtained information to order a motor vehicle abstract (3-year record) from the Department of Licensing.
- ☐ If the volunteer will drive more than one day and will have unsupervised player contact, the club has obtained information to order a Washington State Patrol background check.
- ☐ All "NO" responses have been addressed satisfactorily.
- ☐ All students have parental permission to ride with a volunteer driver.
- ☐ I have reviewed the above information and this driver and vehicle are approved for this trip.

Admin/Designee Signature _____ Date _____