

**St. Joseph/Marquette Catholic School**  
**Field Trip**  
**(Driver Information Sheet)**

**Driver**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ Social Security # \_\_\_\_\_  
\_\_\_\_\_ Phone # \_\_\_\_\_  
Driver's License # \_\_\_\_\_ Date of Expiration \_\_\_\_\_

**Vehicle That Will Be Used**

Name of Owner \_\_\_\_\_ Model of Vehicle \_\_\_\_\_  
Address of Owner \_\_\_\_\_ Make of Vehicle \_\_\_\_\_  
\_\_\_\_\_ Year of Vehicle \_\_\_\_\_  
License Plate # \_\_\_\_\_ Date of Expiration \_\_\_\_\_  
Registration Expiration Date \_\_\_\_\_

If more than one vehicle is to be used, the aforementioned information must be provided for each vehicle.

**Insurance Information**

When using a privately-owned vehicle, the insurance coverage is the limit of the insurance policy covering that specific vehicle.

Insurance Company \_\_\_\_\_  
Policy # \_\_\_\_\_  
Date of Policy Expiration \_\_\_\_\_  
Liability Limits of Policy\* \_\_\_\_\_

\*Please note: The minimal, acceptable liability limit for privately-owned vehicles is \$100,000/\$300,000.

**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 have the required insurance coverage in effect on any vehicle used to transport students.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date