



Parkland Immanuel Christian School

Volunteer Driver Declaration Form

DRIVER INFORMATION:

Full Name (Last, First Middle): _____

Date of Birth: _____

Address: _____

Drivers Licence #: _____ Expiry Date: _____ Class: _____

INSURANCE INFORMATION

Name of Insurance Company: _____ Agent: _____

Policy #: _____ Liability Limit: _____

ACKNOWLEDGEMENTS:

1. I have read, signed and submit to the PICS Volunteer Application, and ensured that the PICS office has a copy.
2. I agree to abide by the requirements of all applicable laws at all times while I am engaged in volunteer driving.
3. I will report to Administration all accidents occurring while I am volunteer driving, and any suspensions of my licence or change in my insurance status which may occur after the date of this declaration.
4. I undertake to at all times maintain insurance in an amount of not less than \$1,000,000 in respect of liability or injury or death of any students who are passengers in my vehicle while I am volunteer driving, and I have consulted my own insurance company before undertaking to transport students.
5. I understand that:
 - i. In case of an insurance claim, the vehicle owner's automobile liability insurance applies before Parkland Immanuel Christian School's insurance.
 - ii. Limited excess automobile liability insurance protection is provided under Parkland Immanuel Christian School's comprehensive general liability insurance policy for authorized volunteer drivers transporting students in privately-owned vehicles on an approved school activity or function. This insurance is only for amounts in excess of the limit of liability provided by the vehicle owners auto liability insurance policy, or any other applicable policies or plans.
 - iii. Damage to the owner's vehicle is not insured by Parkland Immanuel Christian School.

Driver Signature

Date

Please see reverse of form if Driver is not the Registered Owner of the vehicle.



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VEHICLE OWNER INFORMATION AND ACKNOWLEDGEMENT

(Complete if different than Driver)

Vehicle Owner's Name: _____

Vehicle Owner's Address: _____

I Acknowledge that the Driver noted on this form has my permission to use my vehicle for the purpose of Volunteer Driving for Parkland Immanuel Christian School, and is fully covered under my insurance plan on this vehicle.

I have read, understand, and agree to the acknowledgments 3, 4, and 5 as listed elsewhere on this form.

Vehicle Owner's Signature

Date

RECEIVED BY:

Employee Name and Position

Employee Signature

Date