

DRIVER QUESTIONNAIRE

Instructions for Directors: ALL Adults providing transportation to Pathfinders/Adventurers, other than their own children, during the Club Year MUST complete, sign and return this form to their Club Director. The form will be review by the Club Staff in order to determine/confirm the eligibility of a Driver for all club sponsored events/outings for the Club Year.

SECTION A

Driver's Name _____

I am at least 21 years of age: Yes No

Do you have a current Verified Volunteers Background Check? Yes No

Do you have a current/valid Driver's License? Yes No

Do you have current car insurance that meets or exceeds the REQUIRED minimum levels to be a Driver?

\$100,000 / \$300,000 - Limit of Liability Yes No

\$10,000 – Medical / PIP – Personal Injury Protection Yes No

ALL of the ABOVE BOXES MUST be checked "Yes" to qualify as a Driver.

If ALL of the ABOVE BOXES are checked "Yes" then please fill in the following information:

Driver's License # _____ State _____ Expiration Date _____

Address _____ City _____ State _____ Zip _____

Insurance Carrier _____ Expiration Date _____

Please be prepared to show your Driver's License and Insurance Policy information to your Club Director.

SECTION B

Driver - Have you been involved in any at fault accidents within the last three years? Yes No

If yes, please explain: _____

Driver - Have you been cited for any moving violations within the last three years? Yes No

If yes, please explain: _____

By signing, I acknowledge that all the information I have provided is accurate and true.

By signing, I agree to immediately notify the Club Director if there are any changes to the information above.

By signing, I understand that should I be involved in an accident while driving for the Pathfinder/Adventurer Club, **my** personal insurance will be primary.

By signing, I agree not to carry more passengers than the official load capacity for my vehicle and ensure that all vehicle occupants will be required to wear seat belts (no double belting allowed).

Driver's Signature: _____ Date: _____

SIGNATURE REQUIRED

Church Membership: _____