

VOLUNTEER DRIVER REGISTRATION FORM

We deeply appreciate your willingness to assist the church in driving your own or the church's vehicles to enable our ministry. Please complete the following form which will assist our church and assure appropriate insurance coverage and handing of emergencies.

Name: _____

Maiden Name: _____

Address: _____

Phone: (H) _____ (W) _____

Spouse: Name: _____

Address (if different) _____

Phone: _____

Closest Relative: Name: _____

Address: _____

Phone: _____

Last Previous Residence:

Address: _____

How long have you been attending this church? _____

How long have you been a member of this church? _____

Previous church affiliation (name, city). _____

Driver's License Information:

Name on license? _____

Type? _____

Any restrictions? _____

Expiration date? _____

Menges, McLaughlin, & Kalasnik, P.C.

www.YourLawFirmForLife.com

TOLL FREE: 1-866-464-LAWS

In what other states have you had a driver's license in the last ten years?

Have you had any moving traffic violation arrests or convictions in the last five years?
(Include speeding, reckless driving, DUI, no operator's license and any other violations other than parking tickets, expired inspection stickers and similar minor non-moving violations)
_____ Yes _____ No If so, please note the violation and date.

<u>Charge</u>	<u>Conviction (Yes/No/Reduced)</u>	<u>Date</u>	<u>Place</u>
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Have you been denied a driver's license, or had it revoked or suspended?
_____ Yes _____ No If so, please note the date and circumstances.

Provide the following insurance information:

Current insurance company: _____

Policy Number: _____

Agents name: _____

Agent's Address: _____

Agent's Phone Number: _____

How long have you been insured by them? _____

What is the extent of liability coverage? _____

Provide the following information on your medical insurance and physician.

Current medical insurer: _____

Policy Number: _____

Family physician:

Name _____

Address _____

Phone _____

Have you ever had a job which involved substantial driving (e.g. school bus, delivery work, long haul trucking, traveling sales position.)

Yes No If so, please note the date and circumstances:

Have you driven any of the following to the extent that you feel comfortable and competent?
(Check below)

- Automatic shift automobile
- Manual shift automobile
- Small van
- Pick-up truck
- School type bus
- Motor home
- Care-trailer combination
- Large truck

Do you agree to advise the church immediately of any of the following: a change in insurance coverage (amount, company, or agency); moving violations; or revocation, suspension or any other change in drivers' license.

Yes No

Have you read, understood, and do you agree to abide by, the Volunteer Driver Church Policy statement? (answer and sign below)

Yes No

Sign Above

Date