THE ARCHDIOCESE OF GALVESTON-HOUSTON

Adult

Driver Information Sheet

This form is to be used by anyone 21 years and older.

Driver

Name of Driver: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Cell phone: _____ Home Phone: _____

Driver's License #: _____ Date of Expiration: _____

Vehicle to be Used

Name of Owner: _____ Model of Vehicle: _____

Address of Owner: _____ Make of Vehicle: _____

_____ Year of Vehicle: _____

License Plate #: _____ Registration Expiration: _____

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 Number: _____

Date of Expiration: _____

Liability Limits of Policy: _____

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.

I grant the Archdiocese/parish permission to obtain a current driving record from the Department of Public Safety to ensure no violations exist which would prohibit them from providing transportation for events.

Signature: _____ Date: _____