



Policy EEACAA – Attachment B

HORIZON SCHOOL DIVISION
VOLUNTEER AUTOMOBILE AND/OR DRIVER AUTHORIZATION

Volunteers shall take note of the following:

- 1. The owner of the vehicle shall have a minimum of \$2,000,000 third party liability insurance coverage...
2. Students shall not be authorized to act as volunteer drivers. Drivers must be a minimum of 21 years of age.
3. The vehicles shall have seat belts for each passenger and the driver and seat belts shall be worn.
4. Drivers with 6 or more demerits will not be approved
5. Drivers should refrain from transporting one person whenever possible

School _____

Volunteer Driver's Name _____ Phone No. _____

Address _____

Driver's License No. _____ Class _____ Expiry Date _____

Registered Owner of Vehicle _____

Type of Vehicle Used _____ Make _____ Model _____

Name of company you are insured with _____

I have notified my insurance company: _____ Yes _____ No

Policy No. _____ Expiry Date _____

Agent _____

Third Party Liability Limits \$ _____

I hereby declare that:

- 1. The vehicle described above is road worthy and that the information provided is complete and accurate.
2. I agree to drive safely in accordance with the requirements of the Highway Traffic Act and City Traffic Bylaws.
3. I confirm that my driver's license is valid and has not been suspended, that the vehicle is regularly maintained...

Signature of Owner _____

Based on the above declaration I hereby authorize the above named automobile and/or driver to be used on a voluntary basis for the period _____ for the purpose of _____

Principal OR Designate Signature

Date

Attach a copy of the driver's license and pink card.
Original to Principal's Office
Copy to Volunteer