# **Volunteer Driver Information & Authorization - Appendix I**

Volunteer leaders and volunteers who are required to drive children, youth and vulnerable persons must complete the Volunteer Driver Information & Authorization form. Drivers must be 18 years of age minimum and hold a valid Class 5 driver license with Graduated Driver License (GDL) notice removed.

#### **Driver Information**

Name of Driver:						
	Print clearly					
Address:						
	Street Address			City / Province / PC		
Phone Numbers:						
	Daytime	Daytime Evening		Cell		
	•	•				
Email address:						
Driver License No.:						
			Province	of Issue	Expiry Date D/M/Y	
			•			
<b>Emergency Contact</b>						
Name:						
Phone Numbers:						
	Daytime	Evening		Cell		
Relationship:		•				

#### **Insurance Information**

- 1. The Archdiocese requires that the vehicle owner maintain, at all times, valid automobile **Third Party Liability Insurance** of a minimum of \$2,000,000 in respect of liability for injury or death of any passengers in the vehicle the volunteer is operating. In addition the vehicle owner will have a Standard Endorsement Form 44 which provides additional coverage in the event the third party does not have insurance or is under insured.
- 2. In the case of an insurance claim (i.e. third party damage and/or personal injury) the vehicle owner's automobile liability insurance applies **before** that of the Archdiocese.
- 3. Additional automobile liability insurance protection is provided under the Archdiocese's comprehensive general liability insurance policy for authorized drivers transporting parishioners, clients and Archdiocese/parish staff on an approved activity. This insurance is only for an amount in excess of the limit of liability provided by the vehicle owner's liability insurance policy.
- 4. Damage to any vehicle, including the owner's, is the responsibility of the volunteer driver and not the Archdiocese/parish.



## Volunteer Driver Information & Authorization cont'd

## **Vehicle Information**

Vehicle						
	Make	Model	License No.	Seating Capacity Incl Driver		
Vehicle Insurance		•		***************************************		
	Company		Policy No.	Policy No.		
Name of Owner:						
Address:						
	Street Address		City / Province / PC	City / Province / PC		
Phone Numbers:						
	Daytime	Evening	Cell			
Email address:						
Signature of owner (if other than Volunteer Driver)						

#### **Commitments**

By submitting this information form to become a volunteer driver:

- 1. I undertake to ensure that the vehicle used to transport passengers is in safe operating condition.
- 2. I agree to:
  - a. operate the automobile referred to herein in safe manner
  - b. abide by all applicable laws at all times while I am transporting passengers in the line of my volunteer duties
  - c. limit the number of passengers to the number of useable seatbelts (or required child seats)
  - d. require proper use of occupant restraint systems (seatbelts, head restraints, airbags, seat position)
  - e. comply with the directions of the director, pastor or leader of the archdiocesan office, parish, camp or organization.
  - f. have another adult accompany me when driving a child, youth or other vulnerable person.
- 3. I undertake to report to the director, pastor or leader all accidents and any suspension of my license or change in my insurance status which may occur after the date of this authorization while it remains in force.
- 4. I undertake to maintain, at all times, appropriate personal liability and indemnity insurance.
- 5. I am in good physical condition and mental state to make good driving decisions.
- 6. I am not currently taking any medications that would affect my judgment and, if prescribed any medications that may affect my judgment or my ability to drive safely I will not drive until I am no longer taking the medications.

I certify that all the information on this form is truthful and completely accurate. I agree to notify the archdiocesan office, parish, camp or organization within 14 days of any changes in any of the above information. I understand that false statements on this form will constitute grounds for immediate dismissal from my volunteer driver position.

By signing, I agree to abide by safety procedures as established by the Archdiocese/parish and abide by all laws.

Signature of Volunteer Driver	Date (day/month/year)

