

Insurance Verification Form and Volunteer Transportation Agreement

I, the undersigned, volunteer to drive my personal vehicle to provide transportation

For: (name of group or persons) _____

From: (complete address) _____

On: (date) _____ **Leaving at** _____ **AM () PM ()**

To: (place of event)* _____

And returning approximately **Date:** _____ **Time:** _____ **AM () PM ()**

Central California Conference of Seventh-day Adventists requires that each volunteer driver furnish the following information, for approval prior to driving on its behalf.

1. Copy of Valid Drivers License
2. Copy of Insurance ID card showing effective dates of insurance coverage
3. Copy of Insurance Declaration page showing limits of Insurance

Minimum acceptable limits:

Bodily Injury	\$100,000 per person/ \$300,000 per accident
Property Damage	\$50,000 per accident
OR Combined Single Limit BI/PD	\$300,000
Medical Payments	\$5,000
Uninsured Motorist	\$30,000 per person/\$60,000 per accident

Additionally, I agree that:

I will be responsible for any comprehensive or collision losses or damage suffered by my automobile during the above referenced time period.

I shall obey the traffic laws, including the requirement that all passengers use the lap belt and should harness while the vehicle is in transit. If children under the age of eight years and/or under 4' 9" tall are being transported, then an approved car seat shall be used. I am not aware of any defect or mechanical problem with the vehicle that might pose a safety problem.

- Before signing, please note that in accordance with California State Law, the insurance provided by the registered owner of the vehicle is primary. Any insurance carried by the Central California Conference that may be applicable is secondary.

I have read the above and I understand and agree with the above listed requirements.

Signed

Date

Name Printed

Vehicle License Plates

**Event must be sponsored by the Central California Conference or an Entity within the CCC umbrella.*