



Diocese of Steubenville
Safe Environment Program

***FIELD TRIP
DRIVER INFORMATION SHEET***

DRIVER INFORMATION

Name of Driver: _____ Date of Birth: _____
Street Address: _____ Cell Phone #: _____
City: _____ State: _____ Home Phone #: _____
Driver's License #: _____ Expiration: _____ Social Security #: _____

INFORMATION ON THE VEHICLE THAT WILL BE USED

PLEASE NOTE: If more than one vehicle is to be used, this information must be provided for each vehicle.

Name of Owner: _____ Model of Vehicle: _____
Street Address of Owner: _____ Make of Vehicle: _____
City: _____ State: _____ Year of Vehicle: _____
License Plate #: _____ Date of Expiration: _____

INSURANCE INFORMATION

PLEASE NOTE: When using a privately-owned vehicle, the insurance coverage is the limit of the insurance policy covering that specific vehicle.

Insurance Company: _____ Policy #: _____
Liability Limits* of Policy: _____ Date of Expiration: _____

**PLEASE NOTE: The minimal, acceptable liability limit for privately-owned vehicles is \$100,000/\$300,000.*

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 participants of the event.

Driver's Signature: _____ Date: _____