

**ST. CATHERINE OF SIENA SCHOOL**  
**Field Trip Driver Information Sheet**

1. Driver

Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Social security #: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Driver's license #: \_\_\_\_\_

Date of expiration: \_\_\_\_\_

2. Vehicle that will be used:

Name of owner \_\_\_\_\_

Model of vehicle: \_\_\_\_\_

Address of owner: \_\_\_\_\_

Make of vehicle: \_\_\_\_\_

Year of vehicle: \_\_\_\_\_

License plate #: \_\_\_\_\_

Date of expiration: \_\_\_\_\_

Registration expiration date: \_\_\_\_\_

Number of passenger seatbelts: \_\_\_\_\_

If more than one vehicle is to be used, the afore-mentioned information must be provided for each vehicle.

3. Insurance information:

Insurance company: \_\_\_\_\_

Policy#: \_\_\_\_\_

Date of policy expiration: \_\_\_\_\_

Liability limits of policy \*: \_\_\_\_\_

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

4. 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 coverage in effect on any vehicle used to transport the children.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_