



DIocese of Springfield in Illinois

INFORMATION TO OWNERS USING PRIVATE VEHICLES FOR ALL PARISH/SCHOOL ACTIVITY TRIPS

Vehicle Owner: _____

Vehicle Make, Model & Year: _____

Driver's Name: _____ License State and #: _____

Insurance Company: _____ Policy #: _____

Policy Expiration Date: _____ Vehicle Plate Number: _____

I hereby volunteer to drive my private vehicle to transport minors on an activity trip to: _____ on behalf of _____ parish/school in the **Diocese of Springfield in Illinois** (hereafter "the diocese") on _____.

I understand that by thus volunteering, I am acting as an agent of the diocese and must be at least 25 years of age. I also understand that in case of an accident my private insurance carrier assumes primary liability.

X _____ Date X _____ Date
Driver Administrator

List of passengers and emergency phone #:

1. _____	4 _____
2. _____	5. _____
3. _____	6. _____

Please attach a copy of your driver's license and of the insurance card for this vehicle

Administrator: keep a copy of this form on file for 1 year after the safe return of all participants. If there is an accident, retain this form indefinitely. In case of accident, immediately notify the Office for Insurance of the details: (217) 698-8500. The driver must also report the accident to the appropriate authorities and their own insurance company.

NOTE: 11-15 passenger vans are not permitted for transporting youth due to safety concerns per diocesan policy Bk3:206.1.4.

Administrator, please verify that the driver has a valid license, insurance, and diocesan youth protection training.
NOTE: Please verify and attach copies of valid driver's license and insurance card for **every** event.

Valid License

Auto Insurance Policy

Youth Protection Verified