

TRANSPORTATION IN PRIVATE VEHICLES VOLUNTEER DRIVER REGISTRATION FORM

School Year:					
School:					
Name of Voluntee	er Driver:				
Address:					
Phone No:					
Copy of Current	Driver's Li	icense or Driver Abstı	ract on Fil	e: Check Box	
Volunteer Declar	ation Form	on File:	□ Check Box		
				es and regulations govern e acting as a volunteer dri	
insured by a valid at required to carry a r	utomobile lia ninimum of S	ability insurance policy as \$1,000,000 public liabilit	s required by insurance	ed to drive in Alberta, and by Alberta law. I am awa and I have informed my odically over the course of	re that I am insurance
I declare that the verall passengers.	hicle I am dr	iving is mechanically fit	and that the	ere are seat belts in worki	ng condition for
Signature of Volu	ınteer Driv	er Signatu	re of Prin	ncipal Dat	te
I declare that the	informatio	on provided above ren	nains curr	ent and unchanged.	
Initials V. Driver	Date	Initials V. Driver	Date	Initials V. Driver	Date
Initials V. Driver	Date	Initials V. Driver	Date	Initials V. Driver	Date
Initials V. Driver	Date	Initials V. Driver	Date	Initials V. Driver	Date
Initials V. Driver	Date	Initials V. Driver	Date	Initials V. Driver	Date