

Driver Information Form

ATTENTION: The Parish Athletic Recreation Association and _____
Parish (the "Parish").

I am able to provide transportation for field trips and parish related activities. I agree that EACH CHILD MUST BE PROVIDED WITH AND USE A SEAT BELT UNDER UTAH LAW and that each child will be required by me to wear a seat belt during the entire time each child is in my vehicle. There are a total of _____ seat belts available.

I agree that the use of my private vehicle to transport myself and others for a field trip or an activity shall not hold responsible The Catholic Diocese of Salt Lake City, P.A.R.A., the Parish and their employees, agents, representatives and volunteers for any harm or injury resulting from travel to and return from the field trip or activity. It is my understanding that I will receive the directions and the itinerary for each particular field trip or activity and it is my responsibility to review same.

I am twenty-one years of age or older, and hold a valid, non-probationary Utah driver's license. My vehicle is currently registered and insured. I understand that my insurance is the prime carrier in the event of an accident. The pertinent insurance information is as follows:

NAME OF INSURANCE COMPANY: _____

NAME OF INSURANCE AGENT: _____

TELEPHONE NUMBER OF AGENT: _____

POLICY NUMBER: _____

DATE OF POLICY EXPIRATION: _____

POLICY LIABILITY LIMIT:

PROPERTY LIABILITY LIMIT: _____

Dated this _____ day of _____, 20_____

Printed Name of Driver Signature of Driver