



CARDEN SCHOOL
OF FRESNO

PARENT VOLUNTEER DRIVER FORM

A copy of this form must be on file in the school's office for any person not employed at Carden School of Fresno who volunteers to drive students to or from off-campus activities. In addition, please submit a copy of a valid Driver's License, evidence of insurance cards, and a copy of your car insurance policy declaration with coverage limits.

1. Automobile Insurance Information:

Insurance Company _____ Policy Number _____
Expiration Date _____

Limits and Terms of Coverage:

Per person _____ \$ _____
Per accident _____ \$ _____
Combined coverage _____ \$ _____

Personal Automobiles to be driven for off-campus activities:

- | | | | |
|----|----------------------|---------------|---|
| 1. | _____ | _____ | _____ |
| | Make/Year of Vehicle | License Plate | Number of Seat belts Available for students |
| 2. | _____ | _____ | _____ |
| | Make/Year of Vehicle | License Plate | Number of Seat belts Available for students |

2. Driver's License Information:

California Driver's License Number _____
Date of Expiration _____

I consent to confidential DMV screening of my driving record.
The above insurance information is current and I agree to furnish the school office with any changes in the future.

I understand that the law requires children to ride in either a car seat or booster seat until the age of eight, or until they reach a height of 4 foot 9 inches. I understand that all children must be secured with a seatbelt in my vehicle at all times.

Print: _____
First name M.I. Last name

Street Address City State Zip Code Phone Number

Signature _____ Date _____

**Authorization to Obtain Driving Records
(Parent Volunteer Driver)**

Name of Parent Driver

Date

Street Address

City, State, Zip Code

Carden School of Fresno
6901 N Maple Ave.
Fresno, CA 93710

Dear Carden School of Fresno,

Department of Motor Vehicle reports may be obtained as part of Carden School of Fresno 's evaluation of my status as a volunteer driver. The reports may be procured by DiBuduo & DeFendis Insurance Brokers, LLC and may include my driving record.

By signing this disclosure, I hereby authorize DiBuduo & DeFendis Insurance Brokers, LLC to procure such reports and additional reports about me from time to time, as it deems appropriate. I give my permission to DiBuduo & DeFendis to share such reports with Carden School of Fresno.

Sincerely,

Signature of Parent Driver

Print Name

License # & Date of Birth

Attention Carden School of Fresno: This document is for your records. Please retain signed copy in your file as required by law.