

Driver/Transportation Form (Form #6)

Full name: _____

Address: _____

Phone numbers: _____

Are you at least 21 years old? ____ YES ____ NO

Driver's License Number: _____ State: _____

Vehicle description: _____

Vehicle Tag number: _____ Registration state: _____

Owner of vehicle: _____

Insurance Company: _____ Telephone #: _____

Policy Number: _____

Please answer the following:

1. Do you currently possess a valid driver's license? ____ YES ____ NO
2. Have your driving privileges ever been suspended or revoked? ____ YES ____ NO
3. Have you ever been convicted for DUI/DWI? ____ YES ____ NO When? _____
4. Is the above described vehicle in good working order? ____ YES ____ NO
5. If you do not own the vehicle, do you have the registered owner's permission to operate the vehicle and transport others? ____ YES ____ NO
6. Have you read and do you understand the Bethel United Methodist Church policies regarding the transportation of children? ____ YES ____ NO
7. Do you agree to follow all applicable laws and ordinances and all Church policies and procedures regarding the transportation of children? ____ YES ____ NO

Signature of driver

Date