

DRIVER AFFIDAVIT – 2011-2012

Form for all drivers of vehicles carrying students on school-organized, off-campus activities.

DRIVER'S NAME _____

DRIVER'S ADDRESS _____

CAR REGISTRATION _____

INSURANCE COMPANY _____

LIMITS OF COVERAGE FOR ANY ONE PERSON \$ _____

ACCIDENT \$ _____

(For example: \$100,000/person and \$300,000/accident)

LOCAL AGENT _____

This is to certify that I have automobile liability insurance underwritten by the above company. This insurance will be in effect on the day of the field trip.

I further understand that I am not covered by United Church Nursery School, or the United Church of Rowayton, while carrying children on school-organized, off-campus activities.

SIGNED _____

DATE _____

**PLEASE ATTACH A COPY OF YOUR DRIVER'S
LICENSE AND CURRENT INSURANCE CARD.**

This forms must be completed by every driver and filed in the UCNS' Director's office prior to departure on each school-organized activity.