

STUDENT TRANSPORTATION IN PRIVATE VEHICLES
Fairhaven Public Schools

Please complete, sign and return.

Name of Driver: _____ Tel: _____

Address: _____

Do you possess a valid driver's license? _____

Car owner's name (if different). _____

The owner of the vehicle (please check if statement is correct)

_____ has liability insurance of at least \$100,000 / \$300,000 which is effective if driver is other than owner.

_____ A copy of the automobile insurance binder must be on file with the building principal and updated upon each renewal if the use of the vehicle will be reoccurring.

_____ has a valid registration

The vehicle

_____ has an up-to-date inspection sticker.

_____ is equipped with seat belts (capacity will be limited to the number of seat belted positions).

_____ Date _____ Signature of Owner of Vehicle

If the driver is not the owner of the vehicle to be used on the field trip, please complete the following authorization statement.

_____ has my permission to use my vehicle to drive students to and back from
Name of Driver

_____ on _____
Field trip destination Date

I have ascertained that he/she has a valid driver's license and is covered under my liability insurance.

_____ Date _____ Signature of Owner of Vehicle _____ Signature of Authorized Driver