



VOLUNTEER DRIVER'S STATEMENT 2020-2021

I, _____, affirm that I have not, in the last two years, been convicted of any of the violations listed below as defined in the State of Florida Statutes:

1. Reckless driving.
2. Operating a motor vehicle while under the influence of an intoxicant or controlled substance.
3. Homicide or great bodily injury resulting from the operation of a motor vehicle.
4. Commission of a felony in which a motor vehicle is used.
5. Perjury or the making of false affidavit or false statement or certificate to the Department of Transportation.
6. Operating a motor vehicle after revocation or suspension.
7. Operation of a motor vehicle without having furnished proof of financial responsibility when proof of financial responsibility is required.
8. Violation of license restriction.
9. Knowingly fleeing or attempting to flee or elude an officer.

I will notify Naples Christian Academy of any changes in the above information if such occurs during the school year. I affirm that: I presently hold a valid Florida driver's license:

License Number _____

I presently carry automobile liability insurance providing at least \$100,000 liability coverage for property damage and \$100,000 for each person, and a total liability limit of at least \$300,000 per accident.

Name of Company _____ Policy # _____

My passengers and I will, while in my vehicle, sit in permanently mounted forward facing seats and will wear approved seat belts.

I accept responsibility for discipline and behavior management in my vehicle and know that I am **not** authorized to smoke in my vehicle or physically use my cell phone for any reason while driving. I will obtain permission from the teacher before I show a movie or play music in my vehicle. I will not consume alcohol before or during the field trip. I know that I am only authorized to drive the children from NCA to the destination and then directly back to NCA. I am not authorized to stop for gasoline, take-out, etc. while children are in my car.

I accept that I am representing NCA and their mission during the time of the field trip therefore I will dress and act in a professional manner consistent with the policy of the school.

I hereby authorize Naples Christian Academy to conduct a background check and/or driving record check that the Academy deems necessary. **I have attached a copy of my driver's license and insurance card.**

Driver's Signature _____ Date _____

Driver's Cell Phone Number _____