



Driver Authorization

Driver's Name (print) _____

In order to transport Fiddlehead students, you must complete the paperwork to be a volunteer, and:

1. Please attach a copy of your *current* Insurance Declaration Page.
2. Please attach a copy of your current driver's license.

I certify that my privately owned vehicle will always be:

- Covered by liability insurance for the minimum amount:
 - \$300,000 single limit or \$100,000/\$300,000/\$25,000 automobile liability insurance with Uninsured/Underinsured coverage.
- Equipped with one fully functional seat belt for every passenger.
- To the best of my knowledge, in safe mechanical condition and adequate for passenger transportation and/or work performed.

- I further certify that while using a privately owned vehicle for Fiddlehead Montessori, all motor vehicle laws will be obeyed, including all passengers' use of seat belts and use of booster seats for any child less than 8 years of age or under 4'9" tall.
- I further certify that any traffic accidents, no matter how minor, will be reported immediately to the Director.
- I further certify that I am at least 21 years old, and that I possess a valid Washington Driver's license as follows represented by the attached copy.
- I further certify that I have not been convicted of Driving Under the Influence, Driving While Impaired or Reckless Driving in the past five years.

Signature

Date