

Ukrainian Catholic Eparchy of Saskatoon Українська Католицька Єпархія Саскатуну

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APPENDIX D

VOLUNTEER DRIVING FORM

In addition to the other forms, volunteers who drive vulnerable persons in the context of a ministerial relationship, must complete this form. Drivers must be 18 years of age or over and hold a valid Class 5 driver license with Graduated Driver License notice removed.

Full Name of Driver:						Email Address		
Contact Information	Street Address		City/Provinc	City/Province		Postal Code		
	Daytime	Daytime		g		Cell		
Driver's License Information	License No. Prov		Provinc	ce of Issue		Expiry Date: Day/Month/Year		
Vehicle	Make Model		I	License	License Plate No.		Seating Capacity incl. Driver	
Vehicle Insurance	Company	Company			Policy No.			
Name of Owner:	(If different from Driver)			Email <i>F</i>	Email Address			
Contact Information	Street Address			City/Province	y/Province Postal Code			
	Daytime	aytime Evening					Cell	
Signature of Owner (If Other than Volunteer Driver)		I						
transporting parishioners, clients ar Damage to any vehicle, including th Commitments By submitting this application to become 1. I undertake to ensure that the ve 2. I agree to: a. Operate the automobile refe b. Abide by all applicable laws a c. Limit the number of passeng d. Require proper use of occupi e. Comply with the directions o f. Have another adult accompa 3. I undertake to report to the direct after the date of this authorization 4. I undertake to maintain, at all tim 5. I am in good physical condition an 6. I am not currently taking any med ability to drive safely I will not dri I certify that all the information of camp or organization within 14 application will constitute ground	e owner's, is the responsibile a volunteer driver: hicle used to transport passured to herein in safe mannat all times while I am transpers to the number of useable ant restraint systems (seatbout of the director, pastor or leading me when driving a child, tor, pastor or leader all accion while it remains in force. The same of the director while it remains in force and mental state to make good ications that would affect reve until I am no longer taking on this application is trutted days of any changes in a	er. corting passengele seatbelts (or relets, head restrated or of the Eparcy youth or other idents and any subility and indensed driving decismy judgment and the medication of the about the land company of the about the seaton of the seaton	e operating ers in the larequired claints, airbathial office, vulnerable, uspension nnity insurtions. d, if prescrons. letely accove inforr	g condition. ine of my volunt hild seats). ngs, seat position parish, camp or e person. of my license or rance. ribed any medical curate. I agree mation. I under	eer duties.). organization. change in my in	affect my j parchial (judgement or my office, parish,	
By signing, I agree to abide by saf					e by all laws.			
Signature of Volunteer Driv				Date (Dav/	'Month/Year			