

**Holy Spirit Roman Catholic Separate Regional Division No. 4**  
**Volunteer Automobile Driver Authorization**

To be read by the volunteer driver **BEFORE** filling out the form.

**NOTICE RE: INSURANCE COVERAGE**

**VOLUNTEER DRIVERS:**

Those wishing to act as volunteer drivers for school division activities and who are planning to use their own vehicle would be well-advised to inform their insurance company.

With regard to insurance coverage, the school division insurance policies have been endorsed to provide excess liability insurance for volunteer drivers. At the present time, the maximum excess amount is \$9,000,000. However, the school division's insurance does not come into force unless there is a claim in excess of the liability limits in the owner's insurance policy (e.g., if the volunteer driver's insurance limit was \$200,000 – which is required by law – and there is a judgment of \$400,000, the driver's insurance would cover \$200,000 and the school division's excess liability insurance would cover the remaining \$200,000. Damage to the owner's vehicle is NOT insured by the Holy Spirit Roman Catholic Separate Regional Division No. 4.

School division excess liability only applies when no payment has been made for the use of a private vehicle (e.g., gas, mileage, etc.). When payment is made for the use of a private vehicle it is incumbent upon the owner of the vehicle to arrange for proper and adequate insurance through his own insurer.

If you are doing a lot of volunteer driving for school, sporting or church activities, etc., we would suggest that you review your insurance limits with your agent to ensure that you are adequately protected.

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Notes to the Application on other side:

- Note #1: Applications can be approved only when the driver possesses a valid driver's license and is able to respond "no" to questions concerning convictions and suspensions.
- Note #2: The owner of the vehicle is expected to inform his/her insurance agent of the intention to use the automobile and to act as a driver for school board activities. The majority of insurance companies do not require an endorsement to auto policies or an additional premium charge because this driving is classified as occasional and is not done for compensation.
- Note #3: It is required by the division that volunteer drivers carry a minimum \$2,000,000 personal liability limit.

**News Release from Community Health (Lethbridge)**

**Parents please be advised:** A child who is under the age of six years and whose weight does not exceed 18 kg (40 lbs) must be properly secured in a child safety seat. This does not include a booster seat. (Approved booster seats may be used once the child is six years of age or weighs more than 18 kg (40 lbs).

**HOLY SPIRIT CATHOLIC SCHOOL DIVISION NO. 4**  
**VOLUNTEER AUTOMOBILE DRIVER AUTHORIZATION FORM**

A. School: \_\_\_\_\_ School Year: \_\_\_\_\_

B. Volunteer Driver's Name: \_\_\_\_\_

Volunteer Driver's Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Driver's License Class: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

\*\*Has your driver's license been suspended in the last three years? (See Note #1).      **YES**  **NO**

If YES, please provide date of reinstatement: \_\_\_\_\_

\*\*Have you been involved in any accidents as a driver during the last three years?      **YES**  **NO**

If YES, please give details: \_\_\_\_\_

\_\_\_\_\_

\*\*Have you been convicted of an offense under the Traffic Safety Act 2003, related regulations, or for any motor vehicle related offense under the Criminal Code during the last three years?

**YES**  **NO**

If YES, please provide particulars: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. Vehicle: Make \_\_\_\_\_ Model \_\_\_\_\_ Capacity \_\_\_\_\_

Vehicle Owner's Name: \_\_\_\_\_

Insurance on Vehicle-Company: \_\_\_\_\_

Agent: \_\_\_\_\_

Policy #: \_\_\_\_\_

Liability limit: \_\_\_\_\_

Passenger endorsement: **YES**  **NO**  (Please see Note #2)

**D. Commitments:**

\*\*I agree to abide by the requirements of the Traffic Safety Act while acting as a volunteer driver for school functions. I undertake to report to the school principal all accidents and any suspension of my license or change in my insurance status which may occur after the date of this authorization while it remains in force (i.e., current school year).

\*\*I have advised the insurance company that I have applied to serve as a volunteer driver.

\*\*I agree to operate the automobile referred to herein in a safe manner, to drive in accordance with the Traffic Safety Act, to limit the number of passengers to the number of seat belts which are usable and to comply with the directions of teachers or agents of the Holy Spirit Roman Catholic Separate Regional Division No. 4.

I accept the foregoing undertakings and certify that the information contained in this application is accurate to the best of my knowledge:

Please sign below:

Driver: \_\_\_\_\_ Vehicle Owner: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

The above-named driver is authorized to assist the school during the current school year. The help is appreciated.

Signature of Principal: \_\_\_\_\_ Date: \_\_\_\_\_

