



Per our insurance carrier, all employees and volunteers who use their personal or work vehicles to conduct business on behalf of CCHS are required to complete the following form and verify their car insurance (ie: provide a current copy of insurance card or policy declaration page) and if possible, vehicle registration. This form will be kept at CCHS offices in the unlikely event that they are needed. We greatly appreciate your time and cooperation in completing this requirement. Thank you in advance.

Name:		Driver's License #:	
Type of Vehicle			
Insurance Company		Phone Number:	()
Number:			

Your willingness to use your vehicle on behalf of CCHS is very much appreciated. As a volunteer for CCHS, I understand that my safety, the safety of others, and the safety of animals I may transport is paramount. I understand that I must meet the following requirements when driving my own vehicle:

1. Have a valid Driver's License, and be at least 21 years of age.
2. Not have received more than one moving violation in the past 12 months, or more than two in the last 36 months.
3. Not have received any DUI violations (driving under the influence of alcohol or drugs).
4. No felony convictions involving the use of a motor vehicle.
5. Have insurance coverage and have submitted proof of insurance
6. Drive a safe, well-maintained vehicle, with a passenger seat belt for every passenger.
7. I am offering my services to CCHS without compensation.
8. I understand that I shall assume responsibility for passengers or animals I transport while they are in my vehicle.

I certify that the information provided on this form is true. I acknowledge that I have carefully read this document and understand the information therein and I agree to each of the terms and acknowledgments above.

Signature

Date

Please turn in your completed and signed form with a copy of your insurance and registration to the CCHS Volunteer Coordinator prior to or on your first volunteer shift. Forms can also be mailed to the office at our current address or faxed to 925-279-2249. If you have any questions contact the VC at 925-279-2247 x 301. Thank you again. -

For office use only (Documents on file)

Copy of: Vehicle insurance card Vehicle registration