

**Zion Lutheran School
Field Trip
Volunteer Driver
Information**



Driver #1 _____

Driver's License Number _____ Exp. Date: _____

Driver #2 _____

Driver's License Number _____ Exp. Date: _____

Address: _____

Phone Number: _____

Vehicle #1: Year, make, model of car: _____

License Plate Number: _____

of belted seats available (not including driver) _____

Vehicle #2: Year, make, model of car: _____

License Plate Number: _____

of belted seats available (not including driver) _____

Insurance Carrier: _____

Policy Number: _____

Effective Date: ____/____/____ Expiration Date: ____/____/____

In case of Emergency, please contact: _____

Phone Number: _____

**A COPY OF YOUR DRIVER'S LICENSE AND INSURANCE
INFORMATION MUST BE ON FILE IN THE SCHOOL OFFICE**