



DEARBORN HEIGHTS MONTESSORI CENTER

## FIELD TRIP DRIVER INFORMATION

Student Name \_\_\_\_\_ Teacher Name \_\_\_\_\_

PLEASE CHECK THE APPROPRIATE BOX BELOW:

#1 Mother

#2 Father

#3 Other

Our licensing rules require us to formally verify the following information:

#1 Driver Name \_\_\_\_\_ Driver's License # \_\_\_\_\_

Signature \_\_\_\_\_

#2 Driver Name \_\_\_\_\_ Driver's License # \_\_\_\_\_

Signature \_\_\_\_\_

#3 Driver Name \_\_\_\_\_ Driver's License # \_\_\_\_\_

Signature \_\_\_\_\_

To be a driver, each person listed above MUST be able to answer YES to the following questions:

YES Vehicle is in safe operating condition.

YES Passenger seats face front or back (not sideways).

YES A seatbelt or properly anchored child passenger restraint (according to current law) will be provided for each passenger.

YES Each person will be properly restrained while the vehicle is in motion.

YES Passengers will occupy only manufacturer-designed seating positions.

YES Driver has a valid driver's license.

YES Driver has six (6) or less active points on his or her driving record.

YES Driver will have in his or her possession a certificate of no fault insurance for the vehicle being used.

YES Driver will observe posted speed limits.

The school will provide each driver a list of passengers and corresponding emergency names and numbers.

THANK YOU!