School Related Trips
VOLUNTEER AUTOMOBILE TRANSPORTATION FORM

SCHOOL YEAR _______________________

Sierra Expeditionary Learning School (SELS) recognizes the importance of out-of-classroom learning experiences and, hence, encourages educational study trips. SELS will make every effort to provide transportation whenever possible, but there are times when vehicles and/or personnel are not available. At these times, SELS asks parents to help provide transportation.

-------------------------------DRIVER INFORMATION-----------------------------------------------
(Circle One) EMPLOYEE PARENT/GUARDIAN VOLUNTEER

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>Home Phone:</th>
<th>Cell Phone:</th>
<th>Driver’s License No. &amp; State:</th>
<th>Expiration Date:</th>
</tr>
</thead>
</table>

-------------------------------VEHICLE INFORMATION-----------------------------------------------
Name of Owner: | Phone: |
Address: |
Make: | Model: | Year: |
License Plate No. & State: | Registration Expires: |
Seating Capacity: | My Vehicle is in safe working condition (Initial) |

-------------------------------INSURANCE INFORMATION-----------------------------------------------
Insurance Company: | Policy No.: |
Telephone No.: | Expiration Date: |
Liability Limits of Policy: | Copy Provided: |
* Note: Combined single liability of $100k required 50/100/50

DRIVER STATEMENT
I certify that I do not have a total of two or more points on my current driving record with the Department of Motor Vehicles. I have not been convicted of reckless driving or under the influence of drugs or alcohol within the past five years and that the information given above is true and correct. I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages. I hereby waive all claims against Sierra Expeditionary Learning School for injury, accident, illness, or death occurring during, or by reason of, this field trip or excursion. I certify that all the above is true and correct, and that I will ensure that all children will be restrained using the appropriate passenger restraint systems.

Signature: ______________________ Date: ____________

8.18.10