

BOXES OF BASICS VOLUNTEER DRIVER FORM

Name of Driver: _____

Address: _____

Driver's License #: _____ State Issued: _____

Vehicle: Year _____ Make _____ Model: _____

Insurance Company's Name: _____

In order to provide for the safety of those we serve, we must ask each employee/volunteer to answer the following questions: TRUE FALSE

1. I have NOT had a conviction for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) in the last three years. TRUE FALSE

2. I have NOT had two or more convictions for an infraction involving drugs or alcohol (such as driving under the influence or driving while intoxicated) in the last seven years. TRUE FALSE

3. I have had no more than three moving violations or accidents in the last three years. TRUE FALSE

Please be aware that when driving your own vehicle, your insurance is primary.

Certification and Volunteer Waiver

I certify that the information given on this form is true and correct to the best of my knowledge. I understand driving for Boxes of Basics is a profound responsibility and I will exercise extreme care and due diligence while driving. I understand that as an employee/volunteer driver, I must be 21 years of age or older, possess a valid driver's license, have the proper and current license and vehicle registration, and have the required insurance coverage in effect on any vehicle. I agree that I will refrain from using a cell phone or any other electronic device while operating my vehicle.

I know that activities conducted by Boxes of Basics, a Virginia nonprofit corporation, are potentially hazardous. I will not participate unless I am physically and medically able. I agree to abide by any decision of a volunteer leader relative to my ability to safely complete the activity. I assume all risks associated with participating in any activity, including but not limited to: falls, contact with other participants, and all other risks, known or unknown.

Having read this waiver and knowing these facts and in consideration of participating in an activity, I for myself and anyone entitled to act on my behalf, waive and release the Boxes of Basics, its officers and directors, volunteers, activity leaders, co-sponsors and co-participants in any activity, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in any activity.

I grant to Boxes of Basics its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize Boxes of Basics, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Boxes of Basics may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Volunteer Driver Signature Date _____