

Troop 23 Adult Volunteer Driver Information Form

Yes, I am willing to drive Scouts to Scouting Events.

Volunteer's First and Last Name: _____

Volunteer's Preferred First Name: _____

Cell Phone: _____ Email: _____

1. Have you submitted to Troop 23 a copy of your **Youth Protection Training Certificate**? yes no

2. Have you submitted to Troop 23 your **BSA Annual Health and Medical Record Form Parts A and B with a copy of both sides of your Current Health Insurance Card**? yes no

3. Do you hold a current **Driver's License**? yes no
Please provide a copy of your driver's license with this form.

4. Does your auto insurance currently meet state requirements, and will you maintain that insurance coverage for as long as you provide transportation for Scouts? yes no
Please provide a copy of your Proof of Auto Insurance Card

5. Please provide the requested information for vehicles that may be used to transport Scouts here:

<u>Car Make & Model</u>	<u>Year</u>	<u>Total # Seatbelts</u>
_____	_____	_____
_____	_____	_____

This form and your answers serve as your affidavit that you will continue to hold a valid state-issued driver's license and will maintain the state-required insurance coverage for as long as you provide transportation for Scouts.

Volunteer's Signature: _____ Date: _____

Questions about this form and/or how you can help?
Please contact Judith Zapf at judez21@sbcglobal.net or 630-776-1546