



FORM E DIOCESE OF MEMPHIS VOLUNTEER DRIVERS FORM

Name of Driver _____

Address: _____

City	State	Zip Code
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Driver's License Number: _____ State Issued: _____

Vehicle Year _____, Make _____, Model _____

Insurance company's name: _____

Agent's name: _____

Have you had citations or convictions of any of the following in the last three years:

a) Driving under the influence of alcohol or drugs YES NO

b) Hit & Run YES NO

c) Failure to report an accident YES NO

d) Negligent homicide arising out of the use of a motor vehicle YES NO

e) Using a motor vehicle for the commission of a felon YES NO

f) Permitting an un-licensed person to drive YES NO

g) Reckless driving YES NO

h) Participating in a speed contest or illegal race YES NO

In order to provide for the safety of our young people, other members of the parish, and those we serve, we cannot use your services as a volunteer driver if you do not have a current valid drivers license and insurance on your vehicle. If you answered "yes" to any of the questions concerning the citations and convictions, we must also disqualify you as a volunteer driver.

It is expected that all of our volunteer drivers will abide by the Tennessee seat belt law.

Please be aware that as a volunteer driver, your insurance is primary. There is a policy that would offer additional liability should a claim exceed the limits of your policy.

THANK YOU FOR HELPING US WITH OUR TRANSPORTATION NEEDS

X _____
Volunteer Driver

X _____
Church Representative