



Newberg School District 29J
714 East Sixth Street
Newberg, OR 97132

Proof of Automobile Liability Insurance

PARENTS / PATRONS / VOLUNTEERS / STAFF

You have agreed to transport equipment of the Newberg School District to a field trip, function, or for some other school approved purpose. Please be aware that in the event of an accident your insurance will be the primary coverage. In order to serve as a volunteer driver, you will be required to provide proof of coverage of no less than \$100,000 combined single limit bodily injury and property damage liability. Your driving record will be checked. This form is for proof of insurance on transporting **EQUIPMENT ONLY**, students are not allowed to be transported with coverage less than \$300,000.

Please complete the following, providing all information requested, sign where indicated and return to the business office ten (10) working days prior to the date of the event.

Drivers Name (as it appears on your driver's license) : _____
Address : _____ City : _____ State: _____ Zip : _____
Day Time Phone : _____ Date of Birth: _____ License # _____ State: _____

Insurance Company : _____ Effective Date : _____
Policy # : _____ Expiration Date: _____
Policy Limits : _____ (must be \$100,000) Type of Vehicle: _____

School Event : _____ Date of Event: _____
Location of Event : _____

SIGNATURE

DATE

Return to the Business Office. If you do not have the required coverage, you will not be allowed to transport students and/or equipment. Insurance companies will usually increase coverage for specific dates.