IMMACULATE HEART OF MARY CHURCH SPONSORED EVENT DRIVER ACKNOWLEDGEMENT NOTICE FORM

DRIVER/VEHICLE REGISTRATION

Complete only where applicable.	The pupose of this form is to provide information regarding drivers
and vehicles used for ministry put	poses for IHM church sponsored events.

Parish/	Entity Information			
Name City/Tov				own
Church 7	Celephone Number			
Driver	Information (Drivers mu	st be at least 21 years	of age)	
Name				
Address				
		Street, City/Town, State	, Zip	
Contact	Telephone Number			
Driver's	License Number]	Exp.Date	State Issued
I am	A VOLUNTEER	AN EMPLOYEE		
insuranc	o be used by volunteer in the	d your family members	to church spon	sored events; however, other
Year	Make	Mo	odel	
Do you o	wn this vehicle? Yes	No		

Automobile Insurance Company

Policy Number_____

Policy Expiration Date _____

*** LIABILITY: In case of an accident with your vehicle that is transporting students during a church sponsored event, your insurance is responsible to cover any losses. Once your policy limits are exhausted, the Diocesan insurance will provide additional coverage.

*** I acknowledge that any accident that may occur while driving is my responsibility and that my own insurance is primary and the Diocese of Manchester's liability is secondary.

Name Printed

Signature

Date Signed (this form is valid for one year from date of signature)