

Optional Information:

To be completed if you anticipate volunteering in a driver capacity:

If you have a valid driver's license, please print the following information:

Name as listed on license: _____

License Number: _____ State where issued: _____

Do you have access to a motor vehicle? Yes____ No____

Is the vehicle insured for liability and collision? Yes____ No____

Insurance Carrier & Policy Number: _____

Amount of Liability: _____

Automobile License Number: _____ Mo/Yr. of Auto License Expiration: ____/____