

TRINITY LUTHERAN SCHOOL
Volunteer Driver's Statement

I, _____, affirm that I have not in the last two years been convicted of any of the violations listed below:

1. Reckless driver under Wisconsin Stat. Section 346.62.
2. Operating a vehicle while under the influence of an intoxicant or controlled substance under Wisconsin Stat. Section 346.63
3. Any offense set forth in Wisconsin Stat. Section 343.31 including
 - a. Homicide or great bodily injury resulting from the operation of a motor vehicle.
 - b. Commission of a felony in which a motor vehicle is used.
 - c. Failure to stop or render aid as required by state law in the event of a motor vehicle accident resulting in death or personal injury or serious property damage.
 - d. Perjury or the making of false affidavit or false statement or certificate to the Department of Transportation.
 - e. Operation of a motor vehicle after revocation or suspension.
 - f. Operation of a motor vehicle without having furnished proof of financial responsibility when proof of financial responsibility is required.
 - g. Violation of license restriction.
 - h. Knowingly flee or attempt to flee or elude an officer.

I will notify Trinity Lutheran Church or any changes in the above information if such damages occur during the calendar year.

I affirm that:

1. I presently hold a valid Wisconsin driver's license:
License Number _____
2. I presently carry automobile liability insurance providing at least \$10,000 liability coverage for property damage and \$25,000 for each person, to total liability limit of at least \$50,000 per accident.
3. I am presently 18 years of age or older.
4. I, and all passengers in my vehicle, will sit in permanently mounted forward facing seats and will wear approved seat belts.
5. I assume responsibility for discipline in my vehicle.
6. I have an airbag in the front passenger seat of my vehicle, and I will not allow a child under the age of 12 to use that seat.
7. I have never had my automobile insurance cancelled nor have I been turned down for automobile liability insurance for reasons relating to my driving record.

Date: _____ Signature of Driver: _____