



Holy Spirit School
1050 North Texas, Fairfield, CA 94533
(707) 422-5016 Fax (707) 422-0874
www.hsschool.org

**HOLY SPIRIT SCHOOL VERIFICATION OF AUTOMOBILE INSURANCE
FORM REQUIRED OF ALL FIELD TRIP DRIVERS**

Only adults meeting the minimum requirements will be allowed to drive on a field trip. If you do not have the minimum auto insurance requirements shown below, you may not drive any private vehicle in connection with transporting Holy Spirit School students for any school sponsored activities.

PLEASE ATTACH A COPY OF YOUR CURRENT DRIVER'S LICENSE AND INSURANCE POLICY

Name _____

Driver's License #/State _____ Expiration Date: _____

Address _____

City _____ State _____ Zip _____

<u>Vehicle Make, Model and Year</u>	<u>License Number</u>	<u>State</u>
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1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

CERTIFICATION

I hereby certify the insurance policy number _____ issued by

(Name of Insurer/Insurance Company)

is in force. This policy provides liability insurance coverage on the above listed automobile(s) in amounts no less than \$100,000 individual/\$300,000 cumulative each loss or occurrence bodily injury, \$50,000 property damage, \$5,000 per person medical, and \$100,000 uninsured motorist insurance.

I further certify that the vehicle to be used is adequate for the use to which it is put, is equipped with seat belts, and is in safe mechanical condition.

If the above insurance is terminated, or if my driver's license is suspended or revoked, I will immediately cease using the above owned automobile for transporting Holy Spirit School students for school-sponsored activities and events.

I certify I have read, understand, and agree to abide by the terms stated above.

Signature _____ Print Name _____

Date: _____