



# Agreement for Volunteer Drivers

## *School Athletics*

Volunteer Driver Name: \_\_\_\_\_ Date: \_\_\_\_\_  
School: \_\_\_\_\_ Sport/Season: \_\_\_\_\_  
Sports Activity/Event Date(s): \_\_\_\_\_

This form is required for volunteer drivers who will transport students for school athletic activities or events. Volunteer drivers may transport students if they meet the criteria outlined in SFUSD Administrative Regulation. (AR 6153). Please review and confirm that you meet the criteria listed below:

1. I am age 21 or older and possess a valid driver's license. My vehicle is in proper working order and meets all applicable safety standards, and has current registration with the DMV.
2. I have liability insurance of at least \$100,000/\$300,000 for bodily injury, \$100,000 for property damage, and \$100,000/\$300,000 for uninsured motorist coverage. I understand that SFUSD does not carry insurance on private vehicles, and that I and my insurance have primary responsibility for any accidents and/or injury which may occur.
3. I verify that the number of passengers, including the driver, shall not exceed the capacity for which the vehicle was designed, and should not in any case exceed a total of 8 occupants (7 passengers and driver). I understand that 10, 12 or 15-passenger vans are prohibited.
4. I verify that there will be a minimum of two students transported in my private vehicle.
5. I or any other person shall not smoke or have in their immediate possession a lighted pipe, cigar, cigarette, e-cigarette, etc. when there is a minor in the vehicle.
6. I shall wear safety belts and shall ensure that all passengers are properly secured in seat belts or child passenger restraint systems in accordance with law.

**Please attach a copy of the following documentation** with this form or send an electronic copy with the School Administrator or Athletics Director/Manager: (1) Valid Driver's License; (2) Current registration for vehicle that will transport students; (3) Proof of liability insurance meeting the coverage limits outlined above in #2 above.

### **Acknowledgement of Volunteer Driver:**

I have read the volunteer driver criteria above, and I verify that I meet these criteria, I agree with the verifications and understandings and will comply with all requirements outlined above. I shall indemnify and hold harmless San Francisco Unified School District from any and all claims or causes of action including but not limited to personal injuries, property damage, or death resulting from my provision of voluntary transportation under this agreement. I expressly waive and release any and all rights or claims of any nature whatsoever I may have against San Francisco Unified School District, the Board of Education of SFUSD, and its members, agents, employees, arising out of, in connection with or resulting from my participation in the above school activities or events,



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Volunteer Driver Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Vehicle: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

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**Section below to be filled out by the School Administrator or Athletics Director/Manager:**

I confirm that I have received a copy of the Volunteer Driver's (1) Drivers License, (2) Registration and (3) Liability Insurance that meet the requirements outlined above.

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**School Administrator/Athletics Director/Manager Name**

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**Date**