

**Hood River County  
School District**

Code: **EEAE-AR**  
Revised/Reviewed: 2/24/16; 1/19/17

**Proof of Vehicle Liability Insurance**

**General Instructions**

This is a three-part information form. Only fill in the information as it relates to your transportation situation. The bottom of this form must be signed and you must attach a copy of your driver's license to this form.

***PART ONE - STUDENT DRIVING***

**Students Driving Themselves Only**

I, \_\_\_\_\_ parent/legal guardian of \_\_\_\_\_, hereby give my permission and consent to the Hood River County School District to allow said student to be released from school on \_\_\_\_\_ (date) at \_\_\_\_\_ a.m./p.m. and to drive him/herself to \_\_\_\_\_ and from \_\_\_\_\_.

**Student Passenger of Other Students**

I, \_\_\_\_\_ parent/legal guardian of \_\_\_\_\_, hereby give my permission and consent to the Hood River County School District to allow said student to be released from school on \_\_\_\_\_ (date) at \_\_\_\_\_ a.m./p.m. and to ride with (student driver) \_\_\_\_\_ to \_\_\_\_\_ and from \_\_\_\_\_.

In consideration of the Hood River County School District allowing said student to be released. I, on behalf of myself and each student, hereby agree to forego any claims I might have against said district on account of the release, and to hold the district harmless from any liability, which might arise on account of the release of said student.

***PART TWO - EMPLOYEE AND VOLUNTEER ADULT DRIVER - GENERAL INFORMATION***

Destination: \_\_\_\_\_

Type of Activity: \_\_\_\_\_

Driver's Name: \_\_\_\_\_

Address of Driver: \_\_\_\_\_

License Number of Driver: \_\_\_\_\_

Auto (Make, Model and Year) \_\_\_\_\_ License Number of Auto: \_\_\_\_\_

List of Occupants: \_\_\_\_\_

Insurance Company and Policy Number: \_\_\_\_\_

Teacher/Administrator requesting driver: \_\_\_\_\_

***PART THREE - PLEASE READ THE FOLLOWING CAREFULLY!***

The Hood River County School District does not provide automobile liability or physical damage insurance coverage to individuals who provide their own vehicles for school district activities. Individuals must have coverage of \$100,000 per person, \$300,000 per accident and \$50,000 property damage.

The district does not accept any liability for bodily injury or property damages arising from your negligence in driving your own vehicle to and from a school district-sponsored activity.

You are responsible for maintaining your vehicle in a safe condition during the term of this activity. You are responsible for providing the equipment necessary to ensure safe transportation of students or general public during this activity including seats belts, booster chairs as required by law, and tire chains.

As a driver, providing my own vehicle, I hereby acknowledge that I have read and understand the information provided on this form. I accept and agree to the terms and obligations as stated above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date