

Scappoose School District 1J

Code: **EEAE-AR**
Revised/Reviewed: 11/05/01; 6/19/17; 6/11/18
Orig. Code(s): EEAE-AR

Auto Use Permit

Name: _____ Date of Activity: _____

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY

Insurance

The Scappoose School District 1J does not provide automobile liability or physical damage insurance coverage to drivers who provide their own vehicles for district activities.

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

As a driver providing your own vehicle for this activity, you are required to carry valid automobile liability insurance covering bodily injury and property damage. Your insurance must meet or exceed minimum requirements as established by the state of Oregon.

Insurance Co.: _____ Policy No.: _____

Expiration Date: _____ Policy Limits: _____

Driver Responsibilities

You are responsible for maintaining your vehicle in a safe condition during the term of this activity and providing the equipment necessary to ensure safe transportation of students or public during this activity (i.e., tire chains, seat belts, etc.).

You hereby certify that you have a current and valid Oregon drivers license. Copy of drivers license required.

You will not transport children, other than your own, without another adult present.

Drivers license number: _____ Date of Birth: _____

Address: _____ Phone number: _____

Requirements

You must have **no** major traffic infractions and must be 25 years of age or older.

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

Signed: _____ Date: _____