



## ACCESSIBILITY:

To request this file in large print, please email [aoda@wcdsb.ca](mailto:aoda@wcdsb.ca) or call (519) 578-3660.

### Note:

1. Please complete form [APO001-02F](#) Volunteer Application prior to completing this form.
2. A 'Trip Driver' is defined as any person authorized by the Waterloo Catholic District School Board (WCDSB) who has agreed to be a driver for a certain trip while they are driving their own or another licensed automobile (includes trustees, employees, parents, and volunteers).
3. Employees of the Board are not required to transport students nor should this be an expectation of staff who volunteer for co-instructional activities.
4. All Trip Drivers including Volunteer Drivers are advised that, in order to bring into effect the Board's Excess Insurance, they should:
  - Use a licensed automobile which carries valid third-party liability insurance as required under legislation in the Province of Ontario.
  - Provide the Board with prompt written notice, with all available particulars, of any accident arising out of the use of a licensed automobile during a trip on business of the Board.
  - Be aware that the Board's Excess liability insurance comes into effect only after the 'Trip Driver's' insurance has been exhausted, to a combined total of \$20,000,000.
  - Volunteer drivers must have a minimum of \$1,000,000 liability insurance.

**Driver's Legal Name:** \_\_\_\_\_

Agrees to (select **one** of the following):

- Transport students participating in the events listed on the attached school schedule.
- Transport students participating in the following school activity:

## VEHICLE INFORMATION

Make: \_\_\_\_\_ Year: \_\_\_\_\_ Licence Number: \_\_\_\_\_

School: \_\_\_\_\_

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date



## DECLARATION – DRIVER

- I declare that I am 18 years of age or older and that I am fully licensed.
- I am licensed to drive in Ontario and my vehicle is insured by valid automobile liability insurance as is required by Ontario law.  
Name of Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_
- The vehicle is mechanically fit and there are seat belts in working condition for all passengers.
- Where the vehicle is equipped with passenger-side air bags, I will comply with the information contained in the owner's manual with respect to the safety of children seated in the front seat.
- When transporting children, appropriate car/booster seats are provided where required by law and properly secured per the manufacturer's instructions.

\_\_\_\_\_  
Signature of Driver

\_\_\_\_\_  
Date

\* **If you do not own the vehicle**, the following section (Declaration – Vehicle Owner) must also be completed.

## DECLARATION – VEHICLE OWNER (If the volunteer driver does not own the vehicle)

- I declare that I have authorized \_\_\_\_\_ to drive my vehicle to transport students participating in the school event(s) listed on this form.  
Make of Vehicle: \_\_\_\_\_ License Number: \_\_\_\_\_
- The driver is 18 years of age or older, properly licensed to carry passengers and is fully insured as a driver under the vehicle liability insurance as required by Ontario Legislation.  
Name of Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_
- The vehicle is mechanically fit and there are seat belts in working condition for all passengers.
- Where the vehicle is equipped with passenger-side air bags, the driver will comply with the advice contained in the owner's manual with respect to the safety of children seated in the front seat.
- When transporting children, appropriate car/booster seats are provided where required by law and properly secured per the manufacturer's instructions.

\_\_\_\_\_  
Signature of Vehicle Owner

\_\_\_\_\_  
Date

### Notice of Collection

Personal information on this form is collected under the authority of sections 171(1) p.28 and 190(6) of the Education Act in accordance with section 28(2) of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). Information on this form will be used to administer educational excursions and transportation of students for out-of-school programs. Questions about the use of the form should be directed to the school principal. Questions about the collection, use, or disclosure of personal information on the form should be directed to the Privacy Officer at [privacy@wcdsb.ca](mailto:privacy@wcdsb.ca), or 519-580-3297, or 35 Weber St. W., Unit A, Kitchener, ON, N2H 3Z1.

**To be Completed by:** 1. Volunteer Driver; 2. Vehicle Owner (if applicable); 3. School Principal

**Description of Use:** Copy: Main Office (Retention: Current School Year)