

CATHOLIC YOUTH MINISTRY
 Department of Catholic Faith Formation † Diocese of Sacramento

DRIVER INFORMATION

All adults who drive young people for youth ministry must complete this form.
 The information on this form is for the parish youth ministry coordinator's files.
 (The form remains in effect for one year from date of parent/guardian signature.)

Driver Information

First Name	Middle Name	Last Name
Street Address		
City	ZIP Code	
Home Phone	Work Phone	

Driver License Information

State where license is issued	Number	Class/Type*	Expiration Date
Insurance Carrier	Policy Number	Amount of Liability Coverage	Amount of Medical Coverage

*Drivers with a Commerical Driver License, with or without an endorsement on the back of the license, must submit a copy of his/her current Medical Examiner's Certificate (both sides) with this form.

Drivers must be 25 years of age and older and meet the Diocese of Sacramento recommendations for insurance coverage: \$100,000 per person/\$300,000 per occurrence.

My signature affirms that all information on this form is true to the best of my knowledge.

Signature

Date
 (The form remains in effect for one year from date of parent/guardian signature.)

ATTACH A COPY OF YOUR DRIVER'S LICENSE TO THIS FORM. COPY BOTH SIDES OF THE LICENSE IF NECESSARY.