



FIELD TRIP/ATHLETICS TRIP DRIVER'S FORM 2024-2025

Throughout the school year, I may volunteer to be a driver/chaperone for extra-curricular activities (including, without limitation, field trips and athletic events). In order to ensure the safety and well-being of Cambridge Academy students and others who may be passengers in my vehicle and under my care, I certify to Cambridge Academy that at the time I drive for any extra-curricular activity: (1) I will have a valid and effective driver's license; (2) I will have valid and effective automobile liability insurance; (3) I will obey all laws (including, without limitation, seat belt laws, speed laws, and all rules of the road) as well as all rules and regulations of Cambridge Academy while acting as a driver/chaperone. I affirm that my vehicle has working seat belts for every child that I transport in my vehicle.

I am aware of the responsibility and potential liability that could result from my driving/chaperoning on such extra curricular activities and understand that Cambridge Academy's liability insurance will not cover me against any claim arising therefrom.

By signing this form I acknowledge that Cambridge Academy may order a criminal background check on me, and that no major traffic violations, convictions, or suspensions appear on my driving record. I understand that a change in my driving record may make me ineligible to drive on behalf of Cambridge Academy and understand that I have an affirmative duty to report any changes in my driving record or insurance coverage that impact the accuracy of this document.

Please note! To complete the approval process of becoming a field trip driver, copies of the following items are required to be returned with this form:

- A valid copy of the driver's license for each driver listed.
- A Certificate of Liability Insurance (obtained from your insurance company) indicating liability coverage limits, OR, complete the following:

_____ (Driver) has insurance on automobiles through _____ (Agent Name and Contact Number).

I hereby authorize CA to contact my Insurance Agent for the specific and limited purpose of obtaining my Certificate of Liability Insurance.

Completed forms and other required documentation should be returned to the Business Office.

DRIVER #1

Print Name

Signature of Driver/Chaperone

Date

DRIVER #2

Print Name

Signature of Driver/Chaperone

Date

Cambridge Academy reserves the right to deny approval of a field trip driver for any reason whatsoever.