



# HONEY CREEK COMMUNITY SCHOOL

## FIELD TRIP DRIVER FORM

Name of Driver: \_\_\_\_\_

Make of Car: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Number of Points on License: \_\_\_\_\_

Are the following working on your vehicle?

Wipers	Yes	No
All Lights	Yes	No
Signal Indicators	Yes	No
Door Locks	Yes	No
Seat Belts	Yes	No

- I understand that no Honey Creek students may ride in the front seat of a car.
- I understand that each student must wear a seatbelt and only one student may be in each belt.
- I understand that I am responsible for close supervision of the children in my car while the children are in the car and when walking to and from the car.
- I agree to assume responsibility for transporting students on behalf of Honey Creek Community School.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date