



Driver for a Girl Scout Activity Application

Lead Volunteer Retains This Form

Name: _____

Street: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Vehicle Make/Model: _____ Driver's License Number: _____

State: _____ License Plate Number: _____ Number of Seat Belts: _____

Please Check One

Yes	No	
		Currently registered adult who has been approved and appointed.
		Is the vehicle being used during this Girl Scout activity properly registered?
		Does the vehicle being used during this Girl Scout activity display a valid safety inspection sticker?
		Does the vehicle being used during this Girl Scout activity have at least the minimum amount of liability coverage required for drivers by the Commonwealth of Virginia/State of North Carolina?
Insurance Company: _____		
		Does the adult operating the vehicle during this Girl Scout activity have a valid license for the type/size vehicle being used?
		The number of passengers will not exceed the intended passenger limits of the vehicle.
		Will there be a booster seat for each person through the age of 7 (until their 8 th birthday)?
		Each person will have her or his own seatbelt and will use the seatbelt.
		There is adequate space for luggage and equipment which is stowed securely.
		The vehicle is equipped with a first-aid kit and any federal/state-required safety equipment (spare tire, reflective devices, etc.).
		Have you ever been convicted of a traffic violation?
If yes, please state offense, date and location. A conviction record will not necessarily be cause for disqualification.		

I authorize investigation of all statements herein. I understand that falsification or significant omissions of any information may be justification for non-acceptance as a driver for a Girl Scout activity.

Signature _____

Date _____