VOLUNTEER DRIVER APPLICATION

Name of Driver	Driver's License #	E-mail address		
Driver Street Address		Driver Home Phone #		
		Driver Cell Phone #		
City or Town	State	Zip Code		
Days available to drive: N	Ion Tues Wed Thurs Fi	ri		
Levied from any state or fed		had any other disciplinary actions	Yes	No
	victed of a felony by this or a on explaining the circumstan	ny other state or federal Court?	Yes	No
	pending matter referred to in explaining the circumstan		Yes	No
		ed in this application and all attach f and that I will comply with all FIS		
understand that driving as of my current status as a li procedures; 3) comply with of seat belts, cell phone use vehicle defects, or road con	a volunteer is a privilege, not censed driver in CT; 2) come all laws and regulations contained and speed limits; 4) prompted ditions that might affect my	hat my safety and the safety of other ot a right, and therefore I agree to: ply with all of FISH of New Fairfiel ncerning driving, including laws pe tly notify the FISH hotline of any ply safety or the safety of those I am d hile driving on my personal time an	1) provid d's polici rtaining t hysical co riving; 5)	e evidence es and to the use enditions, o notify
provide a copy of all vehicl out of compliance on the da	e insurance on file and meet	to transport FISH of New Fairfield tall requirements. If it is determine red and there is an insurance claim oplicable.	ed that a v	vehicle was
Vehicle owner's signature		Date		
Driver's signature (if not ow	ner)	Date		