

Driver Agreement

Safety of all participants is the primary goal of Riders Club of America. In order to protect everyone involved, this waiver identifies the position of involved parties and the expectations for those involved.

I desire to volunteer as a driver for Riders Club of America, a non-profit organization headquartered in Cedar Rapids, Iowa. I will transport Riders Club members in my personal vehicle within the local service area of this entity. I have selected below the method by which I will be compensated up to the federally mandated amount allowed for charitable contribution.

As a volunteer for Riders Club of America:

- I will maintain the privacy and confidentiality of all members.
- I will maintain a current driver's license
- I will use a vehicle that is properly registered in its parent state and in good working order.
- I acknowledge that Riders Club of America does not provide any auto coverage for me or anyone
 else driving a vehicle on behalf of Riders Club of America, and I must rely on personal auto
 insurance or that of the titled owner.
- I agree to maintain auto insurance on the vehicles I use to transport Riders Club of America members with the coverage limits of at least:
 - o \$250,000 per person
 - o \$500,000 per accident
 - \$100,000 property damage or \$300,000 combined single limit
- I will provide a certificate of insurance annually with the renewal of my insurance to confirm these limits are being met.
- I will notify Riders Club of America of any deviation to the above stated licensure, registration or insurance conditions upon the effective date of such change.
- If I am unable to perform my assigned duties, I will notify Riders Club of America at my earliest convenience so as not to inconvenience the riders who are counting on me.

I wish to assign the driver mileage credit for my services to:

. Mon to accigi	gri tile dirier rimedge eredit for rify corriece to.	
0	Riders Club of America	
0	Local Riders club:	
0	The following federally recognized charity (501(c)(3): A "ridership fund" for those who cannot afford to pay for their rides	
0		
0		
0	A monthly direct deposit to an savings institution	on account (Direct Credit Form Attached)
Driver		
Signed		
Print Name		
Dated		
Internal Use Only		
Date Received _		intered
Franchise #	System	n Confirmation #

FormD2_20161004 © Riders Club of America. All Rights Reserved.