Field Trip Driver Agreement

Thank you for volunteering to drive students on one or more field trips. Please check with your child’s teacher for exact dates and times for trips scheduled throughout the school year.

We ask your cooperation in adhering to the following guidelines:

- Please arrive early.
- Be sure your car is in good working order with plenty of gas.
- Please get from the teacher in charge before leaving campus:
  - Directions,
  - List of students assigned to your vehicle
  - Copies of the Parent Authorization & Insurance Verification forms.
- Please drive in a caravan; stay together at all times.
- PLEASE DO NOT PROVIDE FOOD OR SNACKS TO THOSE EXCLUSIVELY IN YOUR GROUP. This becomes a problem for the children not included.
- Refrain from using your cell phone while transporting children.
- Do not use any tobacco products while transporting children.
- Keep your group of children together at all times. Use your list to count heads frequently to make sure your group is complete.
- Please do not allow a child to leave with anyone, even a parent, until the teacher is notified.
- Please do not allow students to ride in the front passenger seat of the vehicle.
- Upon completion of the activity or performance, load your group immediately and return directly to campus without making any unscheduled stops.
- Quietly walk children to classroom and wait for teacher to return if you should arrive before she does. Do not allow children to go inside alone.
- Please help the children remember the rules and expectations for appropriate behavior - that they may not run ahead or get separated from their assigned group.
- Please do not bring siblings on the trips unless prior consent is obtained.
- IN CASE OF A VEHICULAR EMERGENCY, IF POSSIBLE, PLEASE EXIT THE ROAD/HIGHWAY COMPLETELY BEFORE EXITING THE CAR.

Thank you for your help. We could not have successful field trip experiences without your generous gift of time. Please complete and return the attached sheet confirming that you have read these guidelines and will be driving for one or more field trip.

11306A Inwood Road
Dallas, Texas 75229
214-696-5648
Field Trip Driver Agreement

Name of Driver: __________________________________________________

Driver’s License Number: __________________________________________

License held in the state of: ____Texas ____Other: _______________________________

Current Vehicle Insurance: __________________________________________

Liability coverage: $__________________________ (should be $300,000 or more)

* PLEASE SUBMIT CURRENT COPIES OF DRIVER’S LICENSE AND INSURANCE CARD.*

Number of seat belts in vehicle (excluding driver & front passenger seats): ______________

Color, make and model of your vehicle: _____________________________________________________

I, ______________________________________, agree to drive students on one or more school field trips.

I understand and accept the following conditions:

• I have read and will follow the listed guidelines of the Field Trip Driver Agreement.
• I realize that I am doing this as a volunteer and will not be compensated in any way by Grace Academy.
• I understand that I cannot drive on a field trip without first having completed this sheet.
• It is understood that I am expected to provide Grace Academy with a copy of my current driver’s license and proof of insurance coverage for the vehicle(s) I use on field trips.
• I will insure that my vehicle is in good running condition and has plenty of fuel before arriving at school.
• I will insure that all passengers wear their seat belts, including myself.
• I will drive to and from the designated location without any detours or stops.
• In the event of an accident, I understand that my automobile insurance will be primary for all passengers.
• I promise that I will not drive if I have taken medication that may alter my senses or make me drowsy within 12 hours of the field trip’s departure time. I further agree that I will not be intoxicated or under the influence of any narcotic, legal or illegal.
• I testify that I have no record of reckless driving or driving while under the influence within the last five (5) years.

I give Grace Academy of Dallas permission to perform a Motor Vehicle Record check.

Signature: ______________________________________    Date: __________________________