INSTRUCTIONS FOR THE CLUB DIRECTOR:

**ALL** Adults providing their own personal vehicle(s) as transportation to Pathfinders and or Adventurers, other than their own children, or planning to drive someone else’s personal vehicle(s) during the Club Year MUST complete, sign and return this form to their Club Director. This form must be reviewed by the Club Director/Staff in order to determine and/or confirm the eligibility of a Driver for any and all club sponsored events and/or outings for the Club Year.

**SECTION A OF THE FORM**

This section requires ALL “Yes” Boxes to be checked for the individual to qualify as a Driver.

You **MUST** have the driver show you their Driver’s Driver License

You **MUST** have the driver show you their Insurance Policy and

You **MUST** verify that the information they provided on their form matches the actual documents you are looking at.

You do NOT need to make copies of the License or Policy.

**SECTION B OF THE FORM**

If the Driver qualifies as a driver, you must talk with them and then decide, with your club staff, if you will allow them to be a Driver for the club.

You **MUST** keep the DRIVER QUESTIONNAIRE FORM for your club records.

You **MUST** also fill out the DRIVER QUESTIONNAIRE CHECKLIST in the Youth Ministries Management System (YMMS) for each Driver, but only **AFTER** they have completed their DRIVER QUESTIONNAIRE form.

**NOTES:**

* To fill out the online DRIVER QUESTIONNAIRE CHECKLIST, you only need to enter the Driver’s name after you have VERIFIED that the Driver:
	+ Is 21 or older
	+ Has a current/valid Driver’s License
	+ Has been cleared through the Adventist Screening Verification background check
	+ Meets the required Insurance minimums.
* If you need to add additional drivers during the year, please follow the same process for them.
* Submitted Driver Questionnaire forms are to be **kept** at the Local Club ONLY.

Adults providing their own personal vehicle as transportation to Pathfinders/Adventurers, other than their own children, during the Club Year MUST complete, sign and return this form to their Club Director.

**SECTION A**

Drivers Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❏ Yes ❏ No Are you at least 21 years of age?

❏ Yes ❏ No Have you completed and passed the Adventist Screening Volunteer Background Check?

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ❏ Verified

❏ Yes ❏ No Do you have a current/valid Driver’s License? ❏ Verified

Driver’s License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_

Insurance Carrier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have current car insurance that meets or exceeds the REQUIRED minimum levels to be a Driver:

❏ Yes ❏ No $100,000/300,000 - Limit of Liability ❏ Verified

❏ Yes ❏ No $10,000 - Medical / PIP Limit - Personal Injury Protection ❏ Verified

**ALL OF THE ABOVE BOXES MUST BE CHECKED “Yes” to qualify as a Driver.**

**If ALL of the ABOVE BOXES are checked “Yes” then please proceed to SECTION B:**

**SECTION B**

❏ Yes ❏ No Have you (the driver) been involved in any at fault accidents within the last

three years? If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❏ Yes ❏ No Have you (the driver) been cited for any moving violations with the last three

years? If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* By signing, I acknowledge that all the information I have provided is accurate and true.
* By signing, I agree to immediately notify the Club Director if there are any changes to the information above.
* By signing, I understand that should I be involved in an accident while driving for the Pathfinder Club, my personal insurance will be primary.
* By signing, I agree not to carry more passengers than the official load capacity for my vehicle and ensure that all vehicle occupants will be required to wear seat belts (no double belting allowed).
* By signing, I agree that at NO time will I drive a 15-passenger van.

Driver's Signature (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Church membership:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_