



# St. John the Baptist Catholic Parish

680 Mill Street \ Excelsior \ MN 55331 \ 952-474-8868 \ www.stjohns-excelsior.org

## DRIVER'S INFORMATION FORM (FORM 7)

### Driver

Name \_\_\_\_\_

Parish/School where you are employed/volunteer: \_\_\_\_\_

Driver's License Expiration Date \_\_\_\_\_

Have you had any traffic violations in the last 7 years?    Yes    No    (Circle One)

If Yes, explain \_\_\_\_\_

\*Please present your driver's license with this form so that it may be copied and kept on file. The Driver's License Number will be blacked out to keep it confidential.

### Vehicle

Name of Owner \_\_\_\_\_

Address of Owner \_\_\_\_\_

Year/Make/Model of Car \_\_\_\_\_

License plate # \_\_\_\_\_ Expires \_\_\_\_\_

Passenger Capacity \_\_\_\_\_ (There must be a useable seat belt for each occupant.)

Note: If more than one vehicle is to be used by this driver, this form must be filled out for each vehicle.

### Insurance Information

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_ Expires \_\_\_\_\_

Liability Limits of Policy\* \_\_\_\_\_

\*Please Note: Minimal, acceptable liability for privately owned vehicles is \$100,000/\$300,000.

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a driver, I must be 21 years of age or older, hold a valid driver's license and have the required insurance coverage in effect on any vehicle used to transport individuals.

Signature \_\_\_\_\_

Date \_\_\_\_\_