

TACOMA PUBLIC SCHOOLS

Authorization for Use of Private Vehicle

This authorizes _____ to voluntarily use his/her automobile for transportation of students for emergencies, field trips, off-campus classes or other district sponsored activities during the _____ - _____ school year.

NOTICE: BY SIGNING BELOW, I CERTIFY THAT I HAVE AUTOMOBILE LIABILITY INSURANCE IN FORCE ON THE BELOW NOTED AUTOMOBILE FOR THE BODILY INJURY MINIMUMS OF \$25,000.00 PER PERSON AND \$50,000.00 TOTAL PER ACCIDENT. I UNDERSTAND AND AGREE THAT MY INSURANCE IS PRIMARY IN THE CASE OF ANY INCIDENT AND THAT THE SCHOOL DISTRICT'S LIABILITY (IF ANY) WOULD BE LIMITED TO THE EXCESS OF THE LIMITS STATED ABOVE. I ALSO CERTIFY THAT MY AUTOMOBILE IS IN SAFE MECHANICAL OPERATING CONDITION, THAT I WILL REQUIRE ALL OCCUPANTS TO WEAR SEAT BELTS, AND THAT I WILL OPERATE MY AUTOMOBILE IN COMPLIANCE WITH ALL STATE MOTOR VEHICLE LAWS.

Insurance company _____

Insurance agent and phone _____

Registered owner of automobile _____

Automobile license number _____ State _____

Washington Driver's License # _____ Expiration date _____

By _____
Driver's signature _____ Date _____

By _____
Driver's signature _____ Date _____

NOTE: Students are discouraged from driving private vehicles for school-sponsored events. Students driving private vehicles for a school-sponsored trip must complete this form and must obtain special authorization and written parent permission. Special forms must be obtained from and approved by the Assistant Superintendent for Curriculum, Instruction & Staff Development.

This completed form should be attached to the appropriate field trip request form and will remain in the school office or designated area for a minimum of three (3) years. In the case of an accident or incident, the form will remain indefinitely.