

**LOMA LINDA ACADEMY**  
**TRANSPORTATION INFORMATION - VOLUNTEER CAR**  
*For the School Year 2009 to 2010*

(For field trips involving students of LLA)

**Please include a copy of your insurance verification**

Student Name: \_\_\_\_\_ Teacher: \_\_\_\_\_

Driver's Name: \_\_\_\_\_ (must be at least 21 yrs. of age)

Auto Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Seat belts for \_\_\_\_\_ (number) of students *(Any child under the age of 6 weighing less than 60 lbs. must be secured in a federally approved child passenger restraint system and ride in the back seat of a vehicle.)*

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Insurance Agent \_\_\_\_\_ Ph.# \_\_\_\_\_

**COVERAGE MUST INCLUDE:** Bodily injury/property damage  
\$15,000/\$30,000/\$5,000 (California required minimum)

Insurance effective dates from \_\_\_\_\_ to \_\_\_\_\_

**Please include a copy of your insurance verification**

Driver's name \_\_\_\_\_ License # \_\_\_\_\_

License Plate # \_\_\_\_\_

Person to contact in case of an emergency - \_\_\_\_\_  
Ph. # \_\_\_\_\_

The above information is true and correct. I understand that as a parent driver it is my responsibility to maintain insurance coverage and a valid driver's license throughout the school year. If there is any change in my insurance coverage or driving status, I will update this information with Loma Linda Academy.

\_\_\_\_\_  
Signature Date

DATE                      DRIVING TO

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_