



Form C
PRIVATE AUTO
Driver and Passenger Release

During the course of the school year, your child may be involved in various activities sponsored by the Beaverton School District No. 48. There will be some activities that the District **will not** be providing transportation to and from the event. In the event that private transportation is necessary, please complete the following form that: (a) requests that you or your student be allowed to act as a volunteer driver of other students; (b) requests that your student be permitted to be a passenger in a privately operated vehicle, (c) student will drive **ONLY** him/herself; and (d) releases the District from liability arising out of students being transported in privately owned vehicles.

VOLUNTEER DRIVER INFORMATION: (Must Read and Sign Reverse Side)

Driver's Name (as it appears on Driver's License) DOB Driver's License No., State & Expiration

Driver's Phone Number Driver's Home Address

Insurance Company Insurance Policy No./Expiration Date

Insurance Agent Name Phone Number Name on Insurance Policy

I am fully aware my automobile insurance coverage is primary for myself and all passengers I transport to and from school activities. I request that the above-named individual be allowed to transport students to and from activities sanctioned for private transportation by school officials. I hereby release, hold harmless, defend and indemnify the Beaverton School District, its agents, employees, and board members, from liability arising out of personal injuries and/or property damage resulting from or in any way connected to transport to and from said activities. By signing below, I affirm that I have carefully read and understand the terms and conditions required of volunteer drivers.

Volunteer Driver will drive: self ONLY self and other students

Name of Adult Driver or Parent/Legal Guardian of Driver (Print)

Signature of Adult Driver or Parent/Legal Guardian of Driver Date

PASSENGER INFORMATION FOR PRIVATE TRANSPORTATION:

Name of Student Address Telephone No.

I request that the above-named student be allowed to be a passenger in a privately operated vehicle to and from activities sanctioned for student drivers by school officials. I hereby release, hold harmless, defend and indemnify the Beaverton School District, its agents, employees, and board members, from liability arising out of personal injuries and/or property damage resulting from or in any way connected to transport to and from said activities. By signing below, I affirm that I have carefully read and understand the terms and conditions required of volunteer drivers.

Name of Parent or Legal Guardian (Print)

Signature of Parent or Legal Guardian Date

PLEASE READ AND SIGN REVERSE SIDE

BEAVERTON SCHOOL DISTRICT PARENT OR STUDENT VOLUNTEER DRIVER QUALIFICATIONS

To qualify as a Beaverton School District Volunteer Driver, the following conditions must be met.

Volunteer Drivers:

- 1) Must operate their vehicles with a valid driver's license that is not a provisional driver's license. Drivers must comply with ORS 807.122 which limits drivers using a provisional driver's license from transporting passengers. *
- 2) May not have any moving violations on their driving record for the three (3) years (5 years for a DUI violation) prior to their application to act as a Volunteer Driver.
- 3) Must not have any automobile accidents for which they were liable for the five (5) years prior to their application to act as a Volunteer Driver.
- 4) Must provide a copy of their automobile insurance information to the authority at the school in which they wish to act as a Volunteer Driver.
- 5) Agree by signing this agreement, they will adhere to all traffic ordinances and laws.
- 6) I have completed and passed a Beaverton School District Volunteer Background Check.
- 7) **Agree by signing this agreement that they will release, hold harmless, defend and indemnify the Beaverton School District, its agents, employees, and board members, from liability arising out of personal injuries and/or property damage resulting from or in any way connected to transport to and from said activities. By signing below, I affirm that I have carefully read and understood the terms and conditions required of volunteer drivers.**

(Signature of Parent, Legal Guardian, or _____) _____ Date
(other)

***ORS 807.122 Restrictions on operation with provisional driver license.** (1) The Department of Transportation shall place the following restrictions on a provisional driver license issued under ORS 807.065:

- (a) Except as provided in subsections (2) and (3) of this section, for the first six months after issuance of the license, the holder of the license may not operate a motor vehicle that is carrying a passenger under 20 years of age who is not a member of the holder's immediate family. For the second six months, the holder of the license may not operate a motor vehicle that is carrying more than three passengers who are under 20 years of age and who are not members of the holder's immediate family.
- (b) For the first year after issuance of the license, the holder of the license may not operate a motor vehicle between the hours of 12 midnight and 5 am except when:
 - (A) The holder is driving between the holder's home and place of employment;
 - (B) The holder is driving between the holder's home and a school event for which no other transportation is available;
 - (C) The holder is driving for employment purposes; or
 - (D) The holder is accompanied by a licensed driver who is at least 25 years of age.

UNDER NO CIRCUMSTANCES WILL BSD ACTIVITIES USE VEHICLES WITH A CAPACITY GREATER THAN 10 OCCUPANTS (including driver) TO TRANSPORT STUDENTS OR STAFF UNLESS IT IS AN ODE APPROVED COMMERCIAL CARRIER.

SCHOOL ADMINISTRATOR APPROVAL:	
Name of Activity	School Name
Responsible Staff Member Name	Contact Phone Number
Signature of School Administrator	Date