



**VOLUNTEER RELEASE**

**FORM 552-01**

School Name \_\_\_\_\_

Volunteer Driver's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Alberta Driver's License No. \_\_\_\_\_ Class \_\_\_\_\_ Expiry Date  
m/d/y \_\_\_\_\_

1. Has your driver's license been suspended, or have you been convicted of any criminal offense under the Highway Traffic Act during the last three years?

Yes  No

2. Name of company you are insured with

Company \_\_\_\_\_

Policy No. \_\_\_\_\_ Agent \_\_\_\_\_

3. Are you endorsed by your insurance company to carry passengers?

Yes  No

4. Are you endorsed by your insurance company to receive compensation for transporting students or equipment?

Yes  No

I agree to abide by the requirements of all provincial and other statutes and regulations governing the operation of motor vehicles and the traffic by-laws of any municipality while acting as a volunteer driver for school functions. I undertake to report to the Principal all accidents or suspension of license, which occurs after the date of this authorization, and during the period it remains in force.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Volunteer Driver