



Volunteer Driver/ Vehicle Form



Uniting Church
SYNOD OF NSW & ACT

Church/
Congregation _____ Event
Date/s _____

Driver Information

Drivers Name: _____ Drivers mobile no: _____

License Number: _____ License Type: _____ Expiry: _____
(e.g. C, MR)

WWCC No: _____ Expiry: _____ Date of Birth: _____

Are there any restrictions or endorsements on your licence, if so please supply details? (e.g. P plates)

Have you had any driving offences in the last 12 months? if so please supply details?

Vehicle Information

Is your vehicle registered and in good working order. ☐ Yes. ☐ No

Vehicle Make: _____ Vehicle Model: _____

Vehicle Registration: _____

Is vehicle insured? ☐ Yes. ☐ No Insurance Type: _____

Insurance company: _____

Policy Number: _____ Expiry Date: _____

All voluntary drivers must have insurance coverage. Without insurance, drivers are not permitted to act as a volunteer driver. Drivers must abide by all road rules and speed limits. All passengers must wear a seat belt. Please attach a photocopy of current driver's licence to this completed form.

I confirm that the information I have supplied on this form is true and correct to the best of my knowledge. I agree that I will:

- Drive carefully and follow all road rules.
- Use a registered, roadworthy vehicle.
- Only drive a vehicle for which their licence qualifies them to.
- Ensure that all passengers will wear seatbelts at all times.
- Will never be under the influence of alcohol, illicit drugs, or smoke while driving.
- Will never be alone in the vehicle with a single child.

Signature: _____ Date: _____