

Moraga School District

1540 School Street Moraga, CA 94556 Julie C. Parks, D. Ed., Superintendent

MORAGA SCHOOL DISTRICT **USE OF PRIVATE CARS FOR TRANSPORTING STUDENTS ON SCHOOL CONNECTED TRIPS**

Child's Name: _____ Teacher: _____

I hereby offer to provide transportation for students of ______ School for one or more school connected trips during the school year. I am aware and understand the following conditions concerning the transportation of students: that the Moraga School District carries liability insurance on all school connected activities which would cover any student I may be transporting; that the owner of a vehicle has prime responsibility; and that the District has imposed an insurance standard for the owner/driver of the automobile used in the following minimum amounts:

> Bodily Injury Uninsured Motorist Bodily Injury Property Damage Medical Payment

\$100,000/\$300,000 \$100,000/\$300,000 \$100,000 \$ 5,000

My vehicle has a passenger side air bag. <u>I WILL NOT ALLOW</u> children to ride in the front seat.

I am able to transport the following number of passengers, with seat belts, car seats or booster seats, in my car:

Number of students: (Do not include front passenger seat if it is equipped with an air bag.)

Number of adults:

Total passengers:

I hereby certify that my insurance coverage meets or exceeds the stated minimum coverage, and that I am aware that either the School District or I could be judged liable in case of accident or injury.

Name of Driver #1:	Phone Number:
Driver's License #	Expiration Date:
Name of Driver #2:	Phone Number:
Driver's License #	Expiration Date:

Vehicle Information

Name of Owner:		Address:	
Make/Model:	Year:	License Plate #:	
Registration Expiration Date:			
Insurance Information		Phone Number:	
Policy Number:		_ Expiration Date:	

COPY OF PROOF OF INSURANCE ATTACHED- MUST BE A COPY OF THE INSURANCE **DECLARATION PAGE - SEE EXHIBIT 3**

Driver Statement

I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years, nor have I been arrested or convicted for an offense or crime involving moral turpitude and that the information given above is true and correct. I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages.

I certify that I have received and will abide by the driver instruction (Exhibit 2) provided by the District.

Signature: _____ Date: _____

Exhibit 2 - DRIVER INSTRUCTIONS

When using your vehicle to transport students on field trips or other school activity trips:

- 1. Be sure that you have registered with the district for such purposes and have a valid driver's license and current liability insurance at or above the minimum amount required by law for each occurrence.
- 2. Check the safety of your vehicle: tires, brakes, lights, horn, suspension, etc.
- 3. Carry only the number of passengers for which your vehicle was designed. If you have a pickup truck, carry only as many as can safely sit in the passenger compartment.
- 4. Require each passenger to use an appropriate child passenger restraint system (child car seat or booster seat) or safety belt in accordance with law.
- 5. Do not smoke a pipe, cigar or cigarette while there are minors in the vehicle, as required by law.
- 6. Obey all traffic laws.
- 7. Take the most direct route to the destination or event without unnecessary stops.

In case of emergency, keep all students together and call 911, the district office (925)376-5943, or the school site office.

EXHIBIT 3 - CAR INSURANCE DECLARATION

A car insurance declarations page is the first page of your auto policy, and it explains all the basic details of your policy, like how much your car insurance premiums are and the type of coverage your policy contains. You can think of the declarations page as a summary of your auto insurance policy.

If you don't have your declarations page, you can call your car insurance company to request a copy. You may also be able to access it online through your insurance company's website or app. When you make a change to your coverage or renew your policy, your insurer should send you a new declarations page.

Samples of a Car Insurance Declaration are below.

GEICO.	1011-002-042-0404	Ţ	Declaration Page This is a description of your coverag Please retain for your records. Policy Number: 4234325-237-472-	<i>n</i> .	blicy genius			Policy Numb	er 12345-67-	
EEICD General Insurance Company Dre GEICD Boulevard Fredericksburg, WA 22402-0003			Coverage Period: 17-25-2023 through 01-20-2024		uto Insu	<mark>rance</mark> Decl	aration Pa	ge		
Date issued: July 25, 2023					7984		FARME		**	
OHN 8. WICK 45 PRORY DR AUSTIN TX 58482-2482				Po	olicy Inform	nation	Premiu	m/Fees		
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lamed insured		Aditional Drivers		Exp	siration	06/01/2019 12:01 AM				
DHN 8 WICK		None		Nor	med insured(s)	Jack Smith Jane Smith	Policy Premi	ire + Feles. \$798.	48	
hicle	MIN	Vehicle Location	Finance Company/Li	enholder Ad		1234 Main St. THIS IS NOT A BILL. Brooklyn, NY 11211 Your bill with the amount due y			will be mailed separately.	
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