



VOLUNTEER
PERSONAL AUTOMOBILE USE
RELEASE

Date and purpose of transportation activity: _____

Name: _____

Address: _____ Phone: _____

Driver's License #: _____ Exp. Date: _____

Year/Make of Auto: _____ Vehicle License #: _____

Insurance Carrier/Agent: _____ Phone: _____

Liability Limits: _____ Policy #: _____

Expiration Date: _____ Driving Restrictions: _____

I certify that the above information is correct and that the insurance coverage is in force. I understand that I have volunteered to transport _____, on behalf of the Pasadena Educational Foundation, hereafter known as PEF. I am ***not an employee*** of the Pasadena Educational Foundation and I will use my personal vehicle to provide transportation. I further confirm by my signature below, that I have Automobile Liability insurance coverage in force as required by the State of California and agree to advise the Pasadena Educational Foundation, in writing, of any changes in the above information. I further certify that the above vehicle is mechanically safe. I also acknowledge that my participation is voluntary and that ***I am not*** being compensated by PEF for the transportation that I am providing to or on behalf of the PEF.

Signature of Volunteer Driver _____ Date _____

PEF Administrator Approval _____ Date _____

NOTE: If you drive your personal automobile while volunteering and you are involved in an accident, your auto liability insurance policy will be used first. PEF's liability policy would be used only **after** your policy limits have been exceeded. PEF does not cover, nor is it responsible for, comprehensive and collision coverage to your vehicle.

All persons driving on behalf of PEF must: (1) follow the most direct route; (2) avoid all unnecessary stops; (3) not carry unauthorized passengers; (4) not carry more that maximum number of passengers for their vehicle type and (5) ensure that all vehicle occupants use seat belts if available in the vehicle.

Note: A photocopy of the following: (1) "Proof of Insurance" form presently being provided by your automobile insurance company that indicates expiration date of insurance and (2) driver's license must be submitted with this release.