



Scripture Union

New South Wales

*"Sharing the Good News
of Jesus since 1867."*

Volunteer Driver/Vehicle Check

Safety and harm prevention are equally as important as sharing the gospel. We believe that safe environments create trusting relationships which open real opportunities for faith commitments.

Ministry: _____

Location: _____ Day/Time: _____

Driver Information

Drivers Name _____

Drivers Phone No. _____

License Number: _____

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

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 your vehicle Third party or Comprehensively insured?

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.

Signature: _____ Date: _____

