

**DIOCESE OF DALLAS, TX  
VOLUNTEER DRIVER INFORMATION FORM**

Name of Driver \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Age \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Driver's License # \_\_\_\_\_

**Vehicle to be used (information to be provided for each vehicle used)**

Name of Owner \_\_\_\_\_

Address of Owner \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Year and Make of the Vehicle \_\_\_\_\_ Model \_\_\_\_\_

License Plate # \_\_\_\_\_ Year & Month of Expiration \_\_\_\_\_

Inspection Sticker Expires: \_\_\_\_\_

**Insurance Information**

Name of Insurance Company \_\_\_\_\_

Local Insurance Agent \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Policy Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Liability Limits \_\_\_\_\_

**I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a volunteer driver, I must be 25 years of age or older, hold a valid Texas Driver's License, and have the required insurance coverage in effect on any vehicle used to transport young people.**

\_\_\_\_\_  
Date

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