

**SAN MARINO UNIFIED SCHOOL DISTRICT  
AUTHORIZATION FORM**

For \_\_\_\_\_ Parents to Drive  
\_\_\_\_\_ Students to School-Sponsored Events

Thank you for volunteering to transport students in your private vehicle to this school-sponsored event.

Name of Event: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Location(s): \_\_\_\_\_

Departure Time: \_\_\_\_\_ a.m. p.m. Estimated Return Time: \_\_\_\_\_ a.m. p.m.

District Employee Sponsoring Event: \_\_\_\_\_

***The District requires the following:***

1. Each driver of a private vehicle must have a valid California Driver's License.
2. Each vehicle shall carry and show proof of the following insurance coverage:  
Liability: \$100,000/300,000      Property Damage: \$50,000  
Drivers must provide for administrative approval a copy of the page from your current insurance policy that identifies amount of coverage and expiration date.
3. Each driver agrees to assume liability and/or collision to his/her own vehicle or for his/her negligence.
4. Vehicles may not be overloaded. There must be a seat and seat belt for the driver and each passenger. All occupants in the vehicle must wear properly functioning seat belts.
5. Vehicles must be registered in the state of California and be in proper mechanical condition.
6. All passengers must have on file with the school prior to the trip a completed and signed Field Trip Permission Slip.

Please sign below indicating that you are aware of this notification.

**Attach a copy of the page from your current insurance policy that identifies amount of coverage and expiration date.**

DRIVER'S NAME (please print) \_\_\_\_\_

DRIVER'S SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

CALIFORNIA DRIVER'S LICENSE NUMBER: \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_

POLICY NUMBER: \_\_\_\_\_ LIABILITY AMOUNT: \_\_\_\_\_

SIGNATURE OF SCHOOL ADMINISTRATOR: \_\_\_\_\_