

# MILFORD SCHOOL DISTRICT

## Parent / Staff Transportation Agreement

Any person transporting students must show evidence of: **Insurance Coverage**. This coverage shall include minimum liability limits of \$100,000 per person/300,000 per accident liability, \$100,000 property damage, and \$10,000 medical payments. A certificate of coverage must be mailed or faxed by your insurance company or agent DIRECTLY to the school office. Certificates or copies of policies cannot be accepted from the vehicle owner or driver. Certificates must clearly indicate that the vehicle to be utilized in the transport is covered on the policy. In lieu of a certificate of insurance, an insurance policy declaration page containing this information is acceptable.

Any person transporting students must also hold **a valid operator's license and the transport vehicle must be registered and meet state inspection standards.**

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I, the undersigned, will transport students to and from school during the 2016-17 school year.

I have a minimum of \$100,000 per person/300,000 per accident liability, \$100,000 property damage, and \$10,000 medical payments in automobile insurance on the vehicle to be used in transportation. I currently hold a valid operator's license and the vehicle to be used in transportation meets state inspection standards. I have not been convicted of driving while impaired or driving while intoxicated in the last 10 years.

**I AM VOLUNTEERING TO TRANSPORT STUDENTS. I DO NOT EXPECT TO BE PAID OR REIMBURSED FOR EXPENSES BY THE DISTRICT. I UNDERSTAND THAT IN THE EVENT OF AN ACCIDENT OR INCIDENT DURING TRANSPORTATION, MY INSURANCE IS PRIMARY.**

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\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Please Print Name Sport/Club/Activity/Event

\_\_\_\_\_  
Approved by Principal Date

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**Please sign, date and return to the School Office with a copy of your license and current vehicle registration with inspection certificate.**

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**Please arrange for a certificate of insurance to be mailed or faxed to the School Office.**

High School Fax 603/ 673-4202      Middle School Fax 603/459-0206  
Sage Program Fax 603/673-9883  
Heron Pond School Fax 603/459-0814      Jacques School Fax 603-249-0010

OFFICE USE ONLY: Checklist: <input type="checkbox"/> Criminal Record Check <input type="checkbox"/> Ins Certificate <input type="checkbox"/> Ins Limits are as required above <input type="checkbox"/> Valid Driver's License <input type="checkbox"/> Valid Vehicle Registration & Inspection
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