

## **Driver Agreement Form**

## **Driver Information** Club Team: Driver's Name: Date turned in: / / Academic Year: Anticipated Trips: Agreement (please print), as driver of a vehicle for the above named club, acknowledge my responsibility for the safety of the people riding in my vehicle. I will make every effort to drive within the limits of the law and always drive with discretion. I understand the university does not provide insurance coverage for my travel or for the passengers in my vehicle. It is my responsibility to have current, up to date insurance to cover any accidents that may occur while traveling. MSU CWID Net ID **Phone Number** Driver's License Number State **Expiration Date Auto-Insurance Company Policy Number** Make of Vehicle Street Address City, State Zip **Driver Responsibilities** Please **initial** next to each statement. I understand that I am personally responsible for any traffic citations that I may receive and that the University will not cover any such costs. I understand that I must report any accident that I am involved in within 48 hours and complete all corresponding report forms. I acknowledge that I have no DUI convictions, reckless driving convictions or any other convictions that has led to a license suspension or revocation. I agree to drive safely and follow all local, state and federal laws and ordinances during travel. I will refrain from

distracting behaviors while driving and will only transport approved individuals on this trip.



I understand that if my driver's license is suspended, is r Club Sports staff member immediately and indicate that I am no a staff member of a suspended license or DUI citation I may face removal from the club.	longer able to drive. I understand that failure to notify
I acknowledge that my vehicle inspection and registratic cards are present with me in the vehicle at all times. I agree to u new documents are provided.	
*Must have attached a copy (front and back) of drive	er's license, insurance and registration card.*
Signatures	
By signing this document, I acknowledge all the responsibil	ities stated above as a driver.
Driver Signature	Date
Club Sports Staff Signature	 Date
Coordinator of Intramural and Club Sports Signature	 Date

<sup>\*</sup>Must have attached a copy (front and back) of driver's license, insurance and registration card.\*