CARLSBAD UNIFIED SCHOOL DISTRICT Field Trip by Private Vehicle

Parent's/Driver's Last name:			
Sport:			
Dear Parent: Please fill out the following form. The Field trip form is valid for one school year. SPECIAL NOTE: Please attach a copy of your Driver's License and a current copy of your Insurance Declaration page (not the insurance card) showing policy limits.			
		Private Vehicle Pupil Transportation Minimu	m Requirements
		 No financial charge to the Carlsbad Unifi transportation by private vehicle. 	ed School District shall be made for pupil
o The number of passengers to be transpo	orted in any one vehicle shall not be more than the is deemed appropriate for the vehicle (excluding the		
o Insurance: Public Liability/Bodily Inj Property	ury \$100,000/\$300,000 per accident \$50,000 per accident		
I understand these transportation minimum requ	uirements and carry insurance with:		
Insurance Co.:			
Effective Date:			
Policy Number:			
Limits:			
Vehicle/Driver Info: Driver's License #:			
Year: License Plate#: Mode	el: Color:		
Students that have a valid driver's license may However, students are not allowed to transpose			
Print Parent Name:	Parent Signature:		
Print Student Name:	Student Signature:		