

# Mason County Christian School

470 E Eagle Ridge Drive

Shelton, WA 98584

360.426.7616

## Field Trip Volunteer Driver Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Vehicle(s) license number(s): \_\_\_\_\_

Vehicle Model(s) and Color(s): \_\_\_\_\_

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[  ] I have provided a copy of my driver's license and current insurance card.

In case of an emergency, please contact:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

I am allergic to: \_\_\_\_\_

Thank you for helping our school as a driver during field trips.