

***CENTRAL CHRISTIAN ACADEMY
PRESCHOOL***

FIELD TRIP DRIVER'S FORM

*I verify that I have a current _____ driver's
State*

*license that expires on _____. I also verify
Expiration Date*

*that the vehicle I will be driving on any field trip is covered by
accident and liability insurance.*

Insurance Company

Policy Number

Child's Name (please print)

Parent's Signature

Date