

Template 9

Private Vehicle Registration Form Template

See Transportation Guideline 6 for more information

To be completed by Volunteer Drivers

Purpose of the form:

- to register the private vehicles used for the transport of children in connection with bowls away fixtures or tours.
- to inform drivers of the need to check and amend their insurance, if necessary, if they intend to use their vehicle on behalf of the organisation, and if passengers are being carried in connection with the organisation's activities or events
- the form must be completed by the driver of any private vehicle used for the transportation of individuals to and from bowls activity.

Completed forms must be handed to the organisation's secretary or Bowls Club Welfare Officer

Driver Details	Vehicle Details
Full Name:	Registration Number:
Address:	Colour:
	Name of Registered Keeper:
Post Code:	Make:
Telephone Number:	Model:
Driving license Number and type (e.g. Full):	
Other members authorised to drive the vehicle:	
MOT Expiry Date:	
Insurance Company	
Insurance Expiry Date:	
Road Tax Expiry Date:	
Declaration (please tick each box) <p>I have informed the insurance company of my intention to transport members on behalf of the County/Club. I have stated if I will be claiming expenses in connection with this additional use. <input type="checkbox"/></p> <p>I have extended the policy and paid any additional premium as required by the insurance company <input type="checkbox"/></p> <p>To the best of my knowledge my vehicle is roadworthy. <input type="checkbox"/></p> <p>I will inform all passengers of the legal requirements to wear seat belts. <input type="checkbox"/></p> <p>I will inform all passengers that smoking is not permitted in the vehicle. <input type="checkbox"/></p> <p>I agree not to give children a lift on their own. <input type="checkbox"/></p> <p>I declare that the information stated here is correct and that I will inform the County/Club of any changes. <input type="checkbox"/></p>	

I have agreed to give sight of my driving licence to the administrator.

Signed:

Print Name:

Date:

Bowls Approved Driver

Name:

Registration Number:

Signed:

Date:

County/Club/County Secretary/Chair

Original Driving License and paper seen
listed.

(insert date) and driving offences

Signed:

Date: