

WEST COVINA UNIFIED SCHOOL DISTRICT
EMPLOYEE/VOLUNTEER PERSONAL AUTOMOBILE USE PERMISSION FORM

THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY. FAILURE TO DO SO MAY RESULT IN DENIAL OF REQUEST.

Date of Event see reverse Destination of Event TBD (see reverse)

Type of Event, i.e., Competition, Study Trip, Athletics, Performance, etc. ADLA Percussion Competitions

Name of Driver _____ Birth Date _____

Driver's License Number _____ State Issued _____ Expiration Date _____

↑(If other than CA)

Year & Make of Auto _____ Vehicle License Number _____

Insurance Carrier/Agent _____ Phone Number _____

Liability Limits _____ Policy Number _____

Expiration Date of Policy _____

List Any Driving Restrictions _____

I certify the above information is correct and the insurance coverage is in force. I understand I must have liability insurance coverage in force and agree to advise the District, in writing, of any changes in the above information. I further certify that the above vehicle is mechanically safe.

_____ Owner of Vehicle	_____ Date	_____ Driver's Signature	_____ Date
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Note: If you drive your personal automobile while on District business, and you are involved in an accident, by law, your liability insurance policy is used first. The District liability policy would be used only after your policy limits have been exceeded. The District does not cover, nor is it responsible for comprehensive and collision coverage to your vehicle.

I have read the above statement and approve the use of this vehicle for the purpose stated.

_____ Campus Administrator's Signature	_____ Date
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_____ Business Office Approval Signature	_____ Date
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_____ Advisor Name	_____ Organization	_____ Date
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Indoor Percussion

Date	Show	Location	Distance
Feb. 10	Azusa HS	Azusa	4 miles
Mar. 3	Host ADLA Show	WCHS	0 miles
Mar. 17	Aliso Nigel HS	Aliso Niguel	36 miles
Mar. 31	Whittier HS	Whittier	15 Miles
Apr. 7	Mission Hills HS	San Marcos	77 Miles
Apr. 15	ADLA Semis at Riverside King	Riverside	49 miles
Apr. 28	ADLA Championships	APU	5 miles