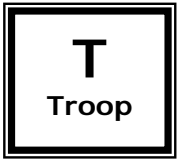




**Girl Scouts of Kentucky's Wilderness Road Council**  
 2277 Executive Drive \* Lexington, Kentucky 40505  
 859-293-2621 \* 800-475-2621  
 www.gskentucky.org



**Transportation of Girl Scouts  
 Driver Information**

**Complete for each driver and retained by Troop Leader. Additional copies are available at all Service Centers.**

Girl Scouts of the U.S.A. and the Girl Scouts-Wilderness Road Council have specific policies and procedures which every leader and driver must abide by to assume that the best safety precautions are taken when transporting girls.

**THEY ARE AS FOLLOWS:**

1. Prior to transporting girls to a Girl Scout activity other than a regularly scheduled trip meeting, a Transportation Provider Form (below) must be completed by the driver.
2. All vehicles must be properly licensed.
3. Drivers must be at least 18 years of age and have a valid driver's license.
4. All vehicles must meet the Kentucky Responsibility Law.
  - a. For injury to, or death of, any one person in any accident: \$25,000
  - b. For injury to, or death of, more than one person in any accident: \$50,000
  - c. For property damage caused by one accident: \$10,000
5. All passengers must wear seat belts.
6. Open bed trucks, campers, or trailers that do not have a seat specifically designed for each person should not be used to transport more passengers than the cab is constructed to accommodate. Furthermore, when passengers are transported, they should be seated only in that part of the vehicles designed to carry passengers.

**(Leader retains the following form)  
 TRANSPORTATION PROVIDER FORM**

Driver Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_  
 Auto License No. \_\_\_\_\_ Car Make/Year \_\_\_\_\_  
 Insurance Policy No. \_\_\_\_\_  
 Insurance Carrier \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_

**Driver Declaration:**

***I declare that I have read the policies and procedures governing the transportation of girls and that I have ( ) current State Driver's License; ( ) Insurance that meets the Kentucky Financial Responsibility Laws.***

Driver License No. \_\_\_\_\_ Date Expires: \_\_\_\_\_  
 State: \_\_\_\_\_

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To be filled out for each event:

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*

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Transporting to: \_\_\_\_\_ From: \_\_\_\_\_  
Driver's Signature: \_\_\_\_\_  
*(Signature verifies that the information on reverse is current and correct.)*