

## CEDAR CREEK SCHOOL DRIVER INFORMATION

Dear Parent,

Our Board of Directors and insuring company respectfully request that as a driver, you provide us with the following information:

1. In compliance with Louisiana Law, is your current liability insurance in force?

Yes

No

2. Is there a seatbelt in working condition for every child who will be riding in your car?

Yes

No

3. Do you have a current valid driver's license? Please attach a copy of your license.

Yes

No

Thank you for your assistance!

Andrew Yepson  
Athletic Director

**Date:** \_\_\_\_\_

**Driver's Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_  
(Printed)

**Driver's Telephone Number:** \_\_\_\_\_ **Cell Number:** \_\_\_\_\_