

---

---

## **Private Automobile Driver’s Liability Insurance Certification**

I hereby certify that I have a currently valid and in force automobile liability insurance policy in accordance with California State Law which covers me and all passengers riding in the automobile that I will be driving in connection with Westwood Charter School curricular trips.

My driver’s license number is: \_\_\_\_\_ expiration date: \_\_\_\_\_

My insurance company is: \_\_\_\_\_

My policy number is: \_\_\_\_\_ expiration date: \_\_\_\_\_

My insurance agent is: \_\_\_\_\_

I also understand that according to state law it is mandatory for me and each passenger in my vehicle to wear a seat belt, one person to a seat belt, and as the driver, I will enforce such regulations. I further agree to adhere to the curricular trip schedule and will not deviate from the directions and rules received from the teacher. I will drive directly to the curricular trip destination and will return directly to school after the trip is over.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Telephone Number

**\*\*Please attach a copy of your insurance card verification.**