

## Driver Authorization & Release from Liability Form

**Instructions** This form must be submitted to the Community Action Northwest/Meals on Wheels of The Shoals office for any meal delivery for which Volunteer personal or rental vehicles will be utilized for transportation. This includes travel to, from, and during the delivery of meals. Only the drivers and vehicles listed may be utilized for delivery.

**Route Information**

Group/Church  
Name: \_\_\_\_\_

Delivery  
Route: \_\_\_\_\_

Coordinator  
Name: \_\_\_\_\_

**Driver Information – Current driver license and proof of insurance are required. Please fill in the following.**

Name \_\_\_\_\_ Best Phone-  
Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Driver  
License # \_\_\_\_\_

Email: \_\_\_\_\_

Auto  
Insurance  
Carrier \_\_\_\_\_ Policy  
Number \_\_\_\_\_

**Release from Liability**

The undersigned driver agrees to save and hold harmless Community Action Northwest and Meals on Wheels Shoals, its officers, agents, and employees from any and all costs, liability, damages or expenses (including the cost of suit and expenses of legal services) or, by reason of any injury or damage to persons or property of any kind whatsoever, including even severe injury or death, arising as a result of this activity. Passengers assume any and all risk of accompanying the undersigned driver in his or her personal vehicle. Further, the undersigned verifies that all information is correct and true.

\_\_\_\_\_  
Driver Signature Date

**For Community Action Northwest/Meals on Wheels of The Shoals Use Only**

\_\_\_\_\_  
Community Action Northwest/Meals on Wheels Shoals Staff Date