

Kennet District Scout Council – Driver Registration Form

Driver Personal Details

Full Name:

Date of Birth:

Group & Section:

Home Address:

Tel (Day & Eve): Mobile:

Email Address:

Driving License Details

License Number:

Date Issued: Date Expired:

Year that you passed D1 test: (if after January 1st 1997)

If you answer “yes” to any of the following please give details in the space provided below.

- Have you been convicted during the past 5 years of any offence in connection with a motor vehicle (including fixed penalty notices)? **YES / NO**
- Have you ever been disqualified from driving? **YES / NO**
- Have you any prosecutions or police enquiries pending for motoring offences? **YES / NO**
- Have you had a motor insurance policy declined, cancelled, or been refused renewal or had any special conditions “imposed”? **YES / NO**
- Have you been involved as a driver in an accident in the last five years regardless of fault?
YES / NO
- Have you currently, or have any history of, any condition or disability which may affect your ability to drive safely now, or in the future? If in doubt declare any condition or disability **YES / NO**
- Are you currently taking any medication which may affect your driving ability? **YES / NO**

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Declaration



Scouts

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I declare that the details given are correct and that within my knowledge, there is no material fact which should be disclosed. I agree to exercise all due care for the safety of my passengers and the security of the vehicle whilst it is in my charge. This includes the provision of a suitably qualified driver in case of emergencies. I will inform the minibus coordinator of any accidents that occur whilst I am responsible for the vehicle. I understand that it is an offence under the Road Traffic Act to knowingly make a false statement to obtain insurance cover. I confirm that all the information supplied above is correct and I will notify the minibus coordinator immediately if anything changes. I understand that any false declaration made above may render the insurance cover for me to drive the vehicle invalid and if I am subsequently involved in an incident whilst driving the vehicle, I may then be held personally responsible to pay costs or damages. I understand that all the information will be treated in the strictest confidence.

Signature of Driver.....

Date

Please email the completed Driver Registration form to: minibus@kennetdistrict.org.uk

Data protection

Kennet District will only hold and process this data for its legitimate interests and / or compliance with its legal requirements. Data may be stored in electronic format and may be passed to other persons within Scouting. Data may be retained for archive purposes. Personal data will be securely destroyed within 12 months of the end of the calendar year following the booking, unless an investigation of an incident or insurance claim is still ongoing, when it will be retained for 12 months from the conclusion of such. Data will not be shared for marketing purposes.