

AFFIRMATION OF DRIVER LICENSE AND VEHICLE INSURANCE FOR ADULT PARTICIPANT DRIVER

Grand Assembly of Colorado, IORG

Form must be updated annually or as changes occur.

Grand Assembly of Colorado has established Travel Guidelines in an effort to encourage safe, informed and responsible transportation to, from and during Assembly and/or Grand Assembly sponsored functions. The Grand Assembly of Colorado Travel Guidelines have been written to provide clear guidelines for the Volunteers and Participants throughout our State. The full Guideline is incorporated by reference as part of this Affirmation.

Drivers and vehicle owners are encouraged to review the full Guideline prior to executing this form, keeping in mind that: Colorado Revised Statutes and Colorado Grand Assembly require all drivers of any vehicles to, from or at a Colorado Grand Assembly sponsored function that transport participants or other volunteers have a valid driver's license. The same also require the owner of any vehicle registered to drive on public streets and for the purpose stated above to carry the proper liability insurance to cover damages of bodily injury to another party and property damage to other's property.

The undersigned agrees and acknowledges as follows, by initialing below:

- _____ I have a valid driver license.
- _____ I have valid vehicle insurance coverage that meets (or exceeds) the minimum threshold required by Colorado law, OR the legal owner of the vehicle holds valid insurance coverage that meets (or exceeds) the minimum threshold required by Colorado law.
- _____ I agree to be fully responsible for payment or reimbursement of any damages, medical charges, or expenses incurred on behalf of any participant or volunteer for which the Driver(s) or Vehicle Owner(s) are found at fault during a Rainbow sponsored function.
- _____ I agree to indemnify and hold harmless Colorado Grand Assembly, the Supreme Officer, all members and volunteers of Colorado Grand Assembly, the International Order of the Rainbow for Girls, all Assemblies of Colorado Grand Assembly, the Masonic Fraternity, and any sponsoring body or affiliates thereof from any claim, demand or action which may be initiated by any 3rd party, individual, organization or entity, against the aforementioned parties for the recovery of such medical expenses, including any legal fees or expenses incurred in defending against such claims.

Signature: _____ Date: _____

Driver Information:

Name as it appears on License: _____

State of Issuance: _____ Driver License #: _____ Expires on: _____

Vehicle Insurance Information:

Vehicle Insurance Carrier Name: _____

Vehicle Insurance Policy #: _____ Policy Expiration Date: _____

Insured Vehicle(s):

Vehicle Make	Model/Model Year	License Plate/State	Vehicle's Owner

(add additional sheets as needed)