Designated Driver Agreement

Chapter Name: _____

Chapter Event: _____

Event Date: _____

Designated Driver Name: _____

_____   _____
State and Driver's License Number   State and Car Registration Number

_____   _____
Insurance Company   Insurance Coverage Limits

I wish to serve as a designated driver for a chapter event. I understand the use of my personal vehicle in connection with this event is strictly voluntary. I understand that if selected, I agree to abide by the following requirements:

1. I am a licensed driver and will be the only operator of my vehicle.

2. My vehicle is in safe and working order.

3. I will drive in a safe manner and obey all traffic laws.

4. I will attach written proof that my automobile liability insurance has a minimum of $300,000 of insurance coverage for liability including coverage for Uninsured and Underinsured Motorists claims.

5. I will not consume any alcohol at least 12 hours prior to providing transportation services for this event nor will I consume alcohol until my services are fully completed.

6. I will not transport any alcohol, controlled or illegal substances in my vehicle.

7. I will require that all passengers wear a seat belt, and will not transport more passengers than there are working seat belts in my vehicle.

8. I will go directly to and from the vent without stopping enroute.

9. I will abide by all Fraternity/Sorority and chapter policies and state laws.

10. I understand that the Fraternity/Sorority does not assume any liability for claims or injuries to persons or damage to property or damage to my vehicle or other vehicles nor does the Fraternity/Sorority provide any insurance to cover my participation in this program and that in the event of any accident my only source of insurance protection is my own automobile insurance.

I will be solely responsible for the operation of my vehicle, and I release the Fraternity/Sorority, the chapter and their officers, employees and agents, from liability for any personal injury or property damage arising out of the operation of my vehicle.

Signature _____ Date _____